

TOWN OF POLK

3680 State Highway 60, Slinger, WI 53086
Planning/Zoning Secretary: Tracy L. Groth
T: 262-677-2123 Email: polk.zoning@att.net

APPLICATION FOR BUSINESS USE

PAGE 1 of 2

Owner(s) of Business: _____

Business Name: _____

Business Address: _____

Business Phone Number: _____ Email: _____

Business Owner's Phone Number: _____

Business Owner's Address: _____

Owner(s) of Business Site: _____

Site Owner's Address: _____

Site Owner's Phone Number: _____

Tax Key #: _____ Section: _____ Zoning: _____

- A. Describe business functions. Be sure to include (1) all activities associated with the business (2) the hours of operation, (3) and number of employees. Please include a general layout of the ingress and egress to the property, parking, loading and unloading. *You may attach a separate sheet.***

APPLICATION FOR BUSINESS USE – PAGE 2

B. Provide 10 copies of the business site plan indicating the following:

- General layout of buildings
- Points of ingress, egress to the property
- Parking
- Loading and unloading
- Signage
- Any other items related to the proposed operation

C. Provide 10 copies of the completed APPLICATION FOR BUSINESS USE

D. Application fee of \$50.00

E. File APPLICATION with the Zoning Secretary ~~at least 2 weeks before the Plan Commission meeting.~~ Within 10 days of May 28, 2015. The Plan Commission meets the first Tuesday of the month.

EMERGENCY CONTACT PERSON (for Police or Fire Emergencies):

Contact Name: _____ Title: _____

Phone: _____ 2nd Phone (optional): _____

Residence Address: _____

I hereby certify that all above statements and attachments submitted herewith are true and correct to the best of my knowledge and belief.

Applicant Signature: _____ Date: _____

Office Use:

Date Filed with Zoning Secretary: _____ Received by: _____

Plan Commission Date: _____ Recommendation: _____

Town Board Date: _____ Action: _____