



Village of Grantsburg

316 South Brad Street
Grantsburg, WI 54840

Start here.

CONDITIONAL USE PERMIT APPLICATION FORM

Property Owner

Name: _____

Address: _____

Phone: _____

Applicant (if different from Owner)

Name: _____

Address: _____

Phone: _____



Existing Zoning: _____

Existing Use: _____

Location of _____

Property: _____

Parcel Identification _____

Number(s): _____

Written description of the proposed use (attach additional pages if necessary):

I understand that the application fee of \$300.00 is due at the time of submitting this application. This amount is not refundable if my application is denied.

Signature of Property Owner (required if applicant is different than the owner): _____ Date: _____

Signature of Applicant: _____ Date: _____

Return to: Village of Grantsburg,
316 South Brad Street
Grantsburg, Wisconsin 54840

Questions? Please call 715-463-2405.



For Office Use Only

Application Fee Paid of \$300.00 Date Application Received: _____

Permit Granted on _____ Permit Denied on _____