Fax: 262-285-3479				
Request For (Please check box)		Date:		
□Zoning District Change	\$200	Temporary Construction Offices and Shelters		
□Ordinance Text Amendment Attachment 1	\$200	□Special Events (Include copy of Certificate of Liability Insurance) \$20 Date of Special Events Time:		
□Variance	\$200	Temporary Storage Containers		
□Conditional Use	\$200	□Other		
Applicant or Agent		Property Owner		
Name		Name		
Address		Address		
Signature		Signature		
Phone Number		Phone Number		
E-Mail		Email		
Property Address				

ing an a Huar

Tax Key Number

Village of Belgium

104 Peter Thein Ave.~Belgium, WI 53004-9446 Phone: 262-285-7931

Description/Purpose

Signature of Village Clerk_

Date

PERMIT APPLICATION

Office Use Only			
Plan Commission Meeting	Date:		Denied
2 nd Plan Commission Meeting	Date:		Denied
Village Board Meeting (If Needed)	Date:		Denied
Published Legal Notice **Will Be Invoiced	Date:		
Hearing	Date:		
Fee:	Date Paid: Check Number:		