

**Town of Oconto Falls - Oconto County, Wisconsin**  
**APPLICATION to**  
**AMEND COMPREHENSIVE PLAN**

Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Property Address (*if different from Applicant address*): \_\_\_\_\_

\_\_\_\_\_

Location of Property: \_\_\_\_\_ ¼ \_\_\_\_\_ ¼, Section \_\_\_\_\_, Town \_\_\_\_\_, Range \_\_\_\_\_

Tax Parcel #(s): \_\_\_\_\_

Total Acreage: \_\_\_\_\_

Current Land Use Classification as it appears on Future Land Use Map: \_\_\_\_\_

Proposed Land Use Classification on Future Land Use Map: \_\_\_\_\_

Please describe reason for proposed amendment to comp plan: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_