



TOWN OF LAWRENCE PUD REVIEW APPLICATION

GENERAL INFORMATION

Purpose:	The purpose of the Planned Development (PD) Zoning District is to encourage desirable and quality development by permitting greater flexibility and design freedom than that permitted under the basic zoning district regulations and to provide for a well-balanced, aesthetically pleasing Town and economically desirable development of building sites within a Planned Development (PD) Zoning District. These regulations are intended to permit latitude in the development of building sites if such development is found to be in accordance with the purpose herein established.
Fee:	\$1000.00
Meeting Dates/Times:	PUD Applications are first reviewed by the Planning and Zoning Board.
Application/Information Submittal:	A completed application along with appropriate fee must be submitted to the Town's Business Office. One (1) complete copy of the information being presented to the Board must be included with the application along with a .pdf copy via email. A representative is required to attend and present the information at the meeting.
Ordinance:	<u>Town of Lawrence Ordinance § 300-130 Article XV PD Planned Development District</u>

READ ALL INSTRUCTIONS PROVIDED BEFORE COMPLETING. IF ADDITIONAL SPACE IS NEEDED, ATTACH ADDITIONAL PAGES.

SECTION 1: APPLICANT INFORMATION

Applicant Name:		
Mailing Address:		
City:	State:	ZIP Code:
Email:		
Phone Number:		

SECTION 2: LANDOWNER/DEVELOPER INFORMATION *(IF DIFFERENT FROM APPLICANT)*

Owner/Developer Name:		
Mailing Address:		Email:
City:	State:	ZIP Code:
Email:		
Phone number:		

SECTION 3: PROJECT OR SITE LOCATION

Project Address:	Parcel #(s):
Parcel Size:	
Current Zoning District:	Frontage:



TOWN OF LAWRENCE PUD REVIEW APPLICATION

Legal Description:

SECTION 4: PUD INFORMATION

Present Use of Parcel:

Proposed Use of Lots:

Please submit 1 hard copy and 1 PDF copy of the PUD if the property is located within the Town.

SECTION 5: CERTIFICATION and PERMISSION

CERTIFICATION: I hereby certify that I am the owner or authorized representative of the owner of the property which is the subject of this permit application. I certify that the information contained in this form and attachments is true and accurate. I certify that the project will be in compliance with all permit conditions. I understand that failure to comply with any or all of the provisions of the permit may result in permit revocation and a fine and or forfeiture under the provisions of applicable laws.

PERMISSION: I hereby give the Town permission to enter and inspect the property at reasonable times, to evaluate this notice and application, and to determine compliance with any resulting permit coverage.

Signature of Applicant:

Date:



FOR OFFICE USE ONLY
APPLICATION/PAYMENT RECEIVED BY

Name: _____

Check # _____ Amount: \$ _____

Date: _____ Meeting Date: _____

Permit #:

Parcel #:

District: _____ Zoning: _____



2400 Shady Court * De Pere, WI 54115 * Phone: (920) 336-9131 * Fax: (920) 336-9193

PUD Application Flowchart

