PETITION FOR APPEAL
WALWORTH COUNTY BOARD OF ADJUSTMENT

DATE FILED: _____ ☐ **$450.00 made payable to Walworth County**

	Owner	Applicant
Name		
Address		
Phone		
Fax		

Legal description of property: ___1/4, ___1/4, S ___, T ___N, R ___E, Town of _____
Physical Address: _____
Tax parcel number: _____

Lot area & dimensions: _____ sq. ft., _____ x _____ ft.

Zoning District (s): _____

Section(s) of the Walworth County Code of Ordinances (Shoreland) Zoning appealed: _____

DESCRIBE GRIEVANCE:
Additional documentation may be attached if necessary to fully answer questions

Signed: _____ **Date:** _____
(Applicant/Agent/Owner)

Remit to: **Walworth County Land Use**
and Resource Management
Department of Zoning
100 W. Walworth St., P.O. Box 1001
Elkhorn, WI 53121