

LAND COMBINATION APPLICATION

(Complete, accurate and specific information must be entered, including full legal names. Please Print.)

Date: _____	
Property Owner(s)/Legal Entity: _____	Applicant (Legal Business Owner Name): _____
Address: _____	Address: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____	Phone: _____ Fax: _____
Email Address: _____	Email Address: _____

Project/Development Name: _____

Project Description: _____

Project Property Address(es): _____ Tax Key Nos. of each parcel to be combined: _____

Existing zoning of each parcel to be combined: _____ Existing use of each parcel to be combined: _____

Area of each parcel to be combined: _____ Proposed Use of the parcels: _____

2025 CMP Land Use Identification of each parcel to be combined: _____

* The 2025 CMP Future Land Use Map is available at:
http://www.franklinwi.gov/DefaultFilePile/User/Planning/2025CMP/2025_CMP_Ch5_2025Future_Land_Use_Map5.7.pdf

All Land Combination submittals must include and be accompanied by the following:

This Application form accurately completed with original signatures (facsimiles and copies will not be accepted).

Application Filing Fee: \$400, payable to the City of Franklin.

An electronic copy of the Legal Description for the subject property.

Ten copies of the information requested in Section 15-9.0312(A) of the UDO*. Plans shall be collated and folded to a size no greater than 9 x 12 inches.

* The City's Unified Development Ordinance (UDO) is available at www.franklinwi.gov.

- A meeting must be scheduled with the Planning Department prior to Application submittal.
- Upon receipt of a complete submittal, staff review will be conducted within ten business days.
- All Land Combination requests require Plan Commission review and Common Council approval.
- Review and consideration of Land Combination Permits shall be in accordance with Section 15-9.0312(B) of the UDO.

The applicant and property owner(s) hereby certify that: (1) all statements and other information submitted as part of this application are true and correct to the best of applicant's and property owner(s)' knowledge; (2) the applicant and property owner(s) has/have read and understand all information in this application; and (3) the applicant and property owner(s) agree that any approvals based on representations made by them in this Application and its submittal, and any subsequently issued building permits or other type of permits, may be revoked without notice if there is a breach of such representation(s) or any condition(s) of approval. By execution of this application, the property owner(s) authorize the City of Franklin and/or its agents to enter upon the subject property(ies) between the hours of 7:00 a.m. and 7:00 p.m. daily for the purpose of inspection while the application is under review. The property owner(s) grant this authorization even if the property has been posted against trespassing pursuant to Wis. Stat. §943.13.

(The applicant's signature must be from a Managing Member if the business is an LLC, or from the President or Vice President if the business is a corporation. A signed applicant's authorization letter may be provided in lieu of the applicant's signature below, and a signed property owner's authorization letter may be provided in lieu of the property owner's signature[s] below. If more than one, all of the owners of the property must sign this Application).

Signature of Property Owner: _____	Signature of Applicant: _____
Name and Title: _____	Name and Title: _____
Date: _____	Date: _____
Signature of Property Owner: _____	
Name and Title: _____	
Date: _____	