Planning Department 9229 West Loomis Road Franklin, Wisconsin 53132

Name & Title (PRINT)

Date:

Email: generalplanning@franklinwi.gov



Phone: (414) 425-4024 Fax: (414) 427-7691 Web Site: <u>www.franklinwi.gov</u>

Date of Application: ____

MINOR SITE PLAN AMENDMENT APPLICATION

Complete, accurate and specific information must be entered. <u>Please Print.</u>

Applicant (Full Legal Name[s])::	Applicant is Represented by: (contact person)(Full Legal Name[s])		
Name:	Name:		
Company:			
Mailing Address:			
City / State: Zip:			
Phone:	Phone:		
Email Address:	Email Address:		
Project Property Information:			
Property Address:	Tax Key Nos:		
Property Owner(s):	<u> </u>		
	Existing Zoning:		
Mailing Address:	Existing Use:		
City / State: Zip:	Proposed Use:		
Email Address:			
*The 2025 Comprehensive Master Plan Future Land Use Map is available at: http://www.franklinwi.gov/Home/ResourcesDocuments/Maps.htm			
Minor Site Plan Amendment submittals <u>for review</u> must include and	he accompanied by the following:		
This Application form accurately completed with original signature(s). Facsimiles and copies will not be accepted. Application Filing Fee, payable to City of Franklin: \$75 Seven (7) complete collated sets of Application materials to include:			
			γ, including description of any new building construction and site work,
			e to property, site improvement costs, estimate of project value and any other
information that is available.)			
Seven (7) folded full size, drawn to scale copies (at least 24" x	36") of the Site Plan Amendment package. (The submittal should include only those		
plans/items as set forth in Section 17-7.0103 of the Unified Development Ordinance that are impacted by the development. (e.g., Site Plan, Building			
Elevations, Landscape Plan, Outdoor Lighting Plan, Natural Res			
One colored copy (11"x17") of the revised building elevations, if ap			
One copy of the Site Intensity and Capacity Calculations, if applications	ble (see Division 15-3.0500 of the UDO).		
Material and Color samples, if applicable.			
Email (or CD ROM) with all plans/submittal materials. Plans must be	e submitted in both Adobe PDF and AutoCAD compatible format (where applicable).		
•Upon receipt of a complete submittal, staff review will be	e conducted within ten business days.		
 Minor Site Plan Amendment requests require Planning Department review and approval. 			
Review and consideration of Minor Site Plan Amendment	ts shall be in accordance with Section 15-7.0107 of the Unified Development Ordinance.		
	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			
			it notice if there is a breach of such representation(s) or any condition(s) of approval. By ranklin and/or its agents to enter upon the subject property(ies) between the hours of 7:00
, , , , , , , , , , , , , , , , , , , ,	on 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 busi	iness is an LLC, or from the President or Vice President if the business is a corporation. A		
	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 - Property Owner	Signature - Applicant		
Name & Title (PRINT)	Name & Title (PRINT)		
Date:	Date:		
Signature - Property Owner	Signature - Applicant's Representative		

Name & Title (PRINT)

Date: ___