

# Eureka Township



## Application for Expansion or Alteration of a Nonconforming Use

*Note: Completed application must be submitted to the Eureka Town Clerk by noon on the Thursday 10 days prior to the Planning Commission meeting.*

OFFICE USE ONLY

Permit No.

Site Address	Property ID No. (PIN)
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Contact Person	Daytime Phone
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**PROPERTY OWNER**

Name	Daytime Phone
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Address	City	State	Zip
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**PURPOSE AND NATURE OF EXPANSION OR ALTERATION**

*(continued on next page)*

I hereby certify that the information provided in this application is true, correct, and complete. I understand that acceptance of this application and fees does not constitute permission to expand or alter a nonconforming use until final approval has been granted by Eureka Township. I understand that projects that involve erecting, altering, expanding, remodeling, or repairing a structure will require building permits, which I am responsible for obtaining. I understand that I shall be responsible for all expenses and outside fees incurred by the Eureka Town Board in processing this application; that the Town Board shall require escrow of funds for fees for attorneys, professional services, and/or other outside expenses prior to incurring such costs; and that I shall be permitted to withdraw this application at any time in writing, but shall not be entitled to refund of escrow funds already expended.

\_\_\_\_\_  
Property owner's signature

\_\_\_\_\_  
Date

SUBMISSION OF THIS APPLICATION AND SUPPORTING DOCUMENTATION DOES NOT IMPLY APPROVAL OF THE USE OR NONCONFORMING STATUS. A DETERMINATION ABOUT THE STATUS OF THE USE WILL BE MADE BY THE EUREKA TOWN BOARD BASED ON INFORMATION PROVIDED BY THE APPLICANT AND/OR OTHER SOURCES.

**DO NOT WRITE BELOW THIS LINE**

Date rcvd:

Rcvd by:

60-Day Extension until:

Is there an existing conditional use permit (CUP) or interim use permit for uses on this property?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Was a nonconforming registration form previously accepted for this use? (if yes, attach)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Did applicant apply for and receive a nonconforming use permit under Ord. 32? (if yes, attach)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**APPROVALS REQUIRED (CHECK ALL THAT APPLY)**

<input type="checkbox"/> Zoning Administrator	<input type="checkbox"/> Complete <input type="checkbox"/> Incomplete	_____ Zoning administrator signature	_____ Date
<input type="checkbox"/> Planning Commission	<input type="checkbox"/> Approved <input type="checkbox"/> Denied	_____ Planning commission chair signature	_____ Date
<input type="checkbox"/> Town Board	<input type="checkbox"/> Approved <input type="checkbox"/> Denied	_____ Town board chair signature	_____ Date

**FEES**

Application fee \$ \_\_\_\_\_ Paid \_\_\_\_\_ Escrow \$ \_\_\_\_\_ Rcvd \_\_\_\_\_ Refunded \$ \_\_\_\_\_ Date \_\_\_\_\_

**CONDITIONS OF ISSUANCE (NUMBER AND ATTACH ADDITIONAL SHEETS IF NECESSARY)**