



VILLAGE OF SAUKVILLE  
639 EAST GREEN BAY AVENUE  
SAUKVILLE, WISCONSIN 53080  
(262) 284-9423

Application # \_\_\_\_\_

**APPLICATION FOR CERTIFICATE OF COMPLIANCE - Change of Use**

**INSTRUCTIONS: Please type or print clearly. Provide all required information.**  
**Remit Completed Form with Required Fee: Commercial/Industrial/Institutional: \$100.00 per Building/Location**

Date of Application: \_\_\_\_\_ Closing/Lease Date: \_\_\_\_\_

Property Address: \_\_\_\_\_

Building Type: Commercial / Industrial / Institutional (circle one) Square Footage: \_\_\_\_\_

Current Owner of Bldg (Seller/Renter): \_\_\_\_\_

Mailing Address (include zip): \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Email Address: \_\_\_\_\_

Real Estate Agent/Attorney, Agency, Phone (s): \_\_\_\_\_

Current Use: \_\_\_\_\_

Proposed Owner/Renter Name: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Business Name: \_\_\_\_\_

Present Address: \_\_\_\_\_

Telephone Number(s): \_\_\_\_\_

Email Address: \_\_\_\_\_

Proposed Use: \_\_\_\_\_

**Attach Description of Business and Plan of Operation**

**Commercial, Industrial and Institutional uses are subject to review by the Plan Commission or the Community Development Authority at scheduled public meetings.** Submittal requirements are available at Village Hall and on the Village website, Economic Development page.

SIGNATURE (owner or owner's agent) \_\_\_\_\_ DATE \_\_\_\_\_

**STAFF USE ONLY:**

Committee Review Required: \_\_\_Yes \_\_\_No (PC / CDA)

Approved: \_\_\_Yes \_\_\_No Date: \_\_\_\_\_

Copy to: Bldg. Insp.  
Fire Dept.  
Police Dept.