



## MARQUETTE COUNTY RURAL ADDRESS APPLICATION



### Section 1 (Owner Information)

Date \_\_\_\_\_  
 Owner's Name \_\_\_\_\_ Phone # \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### Section 2 (Property Information)

Road Name: \_\_\_\_\_ Township: \_\_\_\_\_  
 Legal Description \_\_\_\_\_  
 Subdivision / CSM \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_  
 Parcel ID # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Acres \_\_\_\_\_ or Lot Size \_\_\_\_\_ x \_\_\_\_\_  
 Directions to Property from closest County or State Road: \_\_\_\_\_

**Section 3 (Fees)**  
 The fee for a Rural Address Sign is **\$75**.  
 Make Checks Payable to and Return to:  
  
**Marquette County Zoning Department**  
 PO Box 21  
 Montello, WI 53949

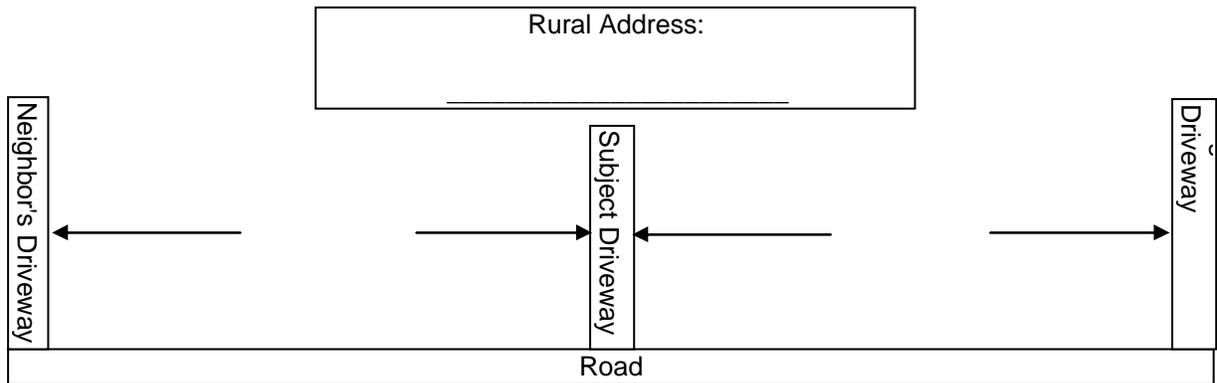
**Section 4 (Proposed or Current Use)**  
 Please indicate the current land use:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Please indicate the proposed land use:  
 \_\_\_\_\_  
 \_\_\_\_\_

### Section 4 (Signature)

The undersigned hereby makes application for a rural address number sign and states that the above information is true to the best of his or her knowledge. By applying for this permit the undersigned grants permission for the Marquette County Zoning Department, its agents or assigns, to enter upon the premises to process this application.

Signature of Owner or Agent \_\_\_\_\_

### \*\*\*\*\*FOR OFFICE USE ONLY\*\*\*\*\*



Receipt #: \_\_\_\_\_ Date Issued: \_\_\_\_\_ Date Installed: \_\_\_\_\_

Receipt #: \_\_\_\_\_ Date Issued: \_\_\_\_\_ Date Installed: \_\_\_\_\_



