

PARKING LOT APPLICATION

City of Kenosha -- Department of Public Works
625-52nd Street, RM 305, Kenosha, WI 53140
262-653-4050; FAX 262-653-4056

Parking Facility License Fee: \$75.00

Address: _____ Project Name: _____

Contractor: _____ Owner: _____

Contact Person: _____ Phone: _____

Is parking lot part of a conditional use permit? _____ YES _____ NO

IF NO, Is the parking lot being enlarged? _____ YES _____ NO

IF NO, Are there any grass or gravel areas being paved? _____ YES _____ NO

Total Paved Square Footage: _____

COMPLETION DATE: _____

Reviewed by CITY ENGINEER or Designee: _____

**If Conditional Use Permit is not applicable,
Parking Plan Must Be Attached.**

I HEREBY ATTEST AND AGREE TO THE ABOVE:

SIGNATURE: _____ DATE: _____

INTERNAL USE ONLY

ORIGINAL: Sidewalk Inspector

COPY: Traffic Engineer
SWU Engineer
NSI