

**TOWN OF SHERMAN
BLIGHT CONDITION PETITION FORM**

The Town of Sherman property owners listed below are writing to draw attention to a condition of blight in the Town of Sherman that constitutes blight under Iron County Zoning Ordinance. We would like to see this matter resolved as discribed below.

Name of Property Owner with Blight: _____

Physical Location Address: _____

Mailing Address of Property Owner: _____

Are Picture(s) Included: ____ Yes ____ No

Describe Condition of Blight: _____

Describe Remedy/Solution You Are Seeking: _____

We, the undersigned certify that each person listed is a property owner in the Town of Sherman, Iron County, Wisconsin. (a minimum of three property owner signatures are required)

1 Print Name	Signature	Address
2 Print Name	Signature	Address
3 Print Name	Signature	Address
4 Print Name	Signature	Address
5 Print Name	Signature	Address

Attached a separate page with more signatures if necessary.