

Town of Cross Plains Land Use Petition Application

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|---|--|
| OFFICIAL USE ONLY | |
| Dane County Application Petition #: _____ | |
| Site Visit Date: _____ | |
| Plan Commission Meeting Date: _____ | |
| Town Board Meeting Date: _____ | |

Petitioner:

| | | |
|---|-----------------------------------|---|
| Petitioner's Name: <i>DAVID J. ELLESTAD</i> | | Date: <i>8/27/14</i> |
| Petitioner's Address: <i>8181 COYLE LANE CROSS PLAINS WI 53528</i> | | Email Address: <i>ellestad@crossplains.net</i> |
| Home Phone <i>608-794-2006</i> | Work Phone <i>608-252-7658</i> | FAX |

Owner:

| | |
|--|------------------------|
| Owner's Name (if different from petitioner) | Home Phone |
| Full Address | |
| I, _____, authorize and agree to _____ (owner's name) (petitioner's name) | |
| submitting this petition pertaining to land I own in the Town of Cross Plains. | |
| Signature of owner <i>[Signature]</i> | Date <i>8/27/14</i> |

Agent:

| | |
|--------------|-------|
| Agent's Name | Phone |
| Address | |

Property information (separate copy for each parcel):

| Section: | Parcel Number: | Acres in Parcel: | Acres to be rezoned: | Present zoning: | New zoning: |
|-----------|----------------------------|------------------|----------------------|-----------------|--------------|
| <i>25</i> | <i>020/0707-253-8581-9</i> | <i>2</i> | <i>2</i> | <i>A 2(2)</i> | <i>A(2)4</i> |
| <i>25</i> | <i>020/0707-253-8581-9</i> | <i>2</i> | <i>2</i> | <i>A 2(2)</i> | <i>A(2)8</i> |
| Section: | Parcel Number: | Acres in Parcel: | Acres to be rezoned: | Present zoning: | New zoning: |

Parcel address (if available): _____

Intent or purpose (if a Map Amendment Petition, attach a page stating purpose and how it fits the goals and policies of the Plan):

Property information cont'd:

| | | |
|--|--------------------------------------|-------------------------------------|
| Is there a house or building on this parcel now? | YES | <input checked="" type="radio"/> NO |
| Have you previously submitted an application to rezone this parcel? | YES | <input checked="" type="radio"/> NO |
| Is this the original tract of land from December, 1981? | <input checked="" type="radio"/> YES | NO |
| Has the property been previously rezoned? | YES | <input checked="" type="radio"/> NO |
| If yes, how many times? | | |
| Are there any deed restrictions on the property? | YES | NO |
| How many acres do you own on the parcel you are requesting a split to be taken from? | NA | |
| How many development rights (splits) have been used from this land since December, 1981, including those taken by previous owners? | NA | |
| Explain land divisions, provide dates and attach documentation. | (See Attached) | |

If this is a petition for a Land Use Plan Map amendment, attach a legal description of the parcel.
 Attach a map of the parcel as it currently exists, showing public roads.
 Attach a preliminary map of the parcel(s) as they would exist under the proposed change.
 The division of this parcel will create how many lots, parcels or building sites? _____
 Have you made an application for this change with Dane County? YES NO

Conditional Use Permit (CUP), Variance and/or Special Exemption

| | | | |
|-----------------------|-----|----------|-------|
| Are you requesting: | CUP | VARIANCE | OTHER |
| Is there presently a: | CUP | VARIANCE | OTHER |

Please explain:

Intent or purpose:

Applicant's Statement:

If additional parcels are involved in this petition under ownership the same or different from the owners listed above, please provide the information requested above for each owner and the parcel(s) individually owned on a duplicate of this form.

I attest that all the information on this form is accurate.


 Signature of applicant

8-27-19
 Date

Please return ten copies of the completed application, together with ten copies of any required maps, to the Chair of the Comprehensive Planning Commission of the Town of Cross Plains.
 Five additional sets of copies should be sent to the Clerk of the Town of Cross Plains.