

Registration Report													
Report Ge #####													
Topic	Webinar I	Schedule	Duration	(# Register	# Canceled	# Approved	# Denied						
Dane Cou	949 3680 5	#####	120	2	0	2	0						
Attendee Details													
First Name	Last Name	Email	Address	City	Phone	Registration	Approval	Which pet	Do you su	Do you want to speak?			
Christine	Gonzalez	christineg	7219 Squit	Middleton		#####	approved	11735	Oppose	I do not want to speak but I am available for questions.			
Janice	Linzell	rrlinzell@	7230 Squit	Middleton	6.08E+09	#####	approved	11735	Neither	I do not want to speak but I am available for questions.			

DANE COUNTY ZONING & LAND REGULATION COMMITTEE

REMOTE MEETING APPLICANT REGISTRATION FORM

Applicants for a rezoning petition must fill out this form prior to participating in a remote meeting of the zoning committee.

IMPORTANT: please download and save this form and then fill out using Adobe Reader. You may also print out the form and fill it in by hand.

Please submit completed forms by email at your earliest convenience. Attach your completed form to an email and send to: lane.roger@countyofdane.com.

DATE of Meeting: Oct.12th, 2021

Your Name: Pete & Chelsea Sachs

Your Mailing Address: 3285 Nelson Rd

Sun Prairie, WI

Your Phone #: 608-280-1586

Zoning Petition/CUP#: 11671

Your Email Address: Chelsearenee83@gmail.com

Please check all appropriate boxes below to indicate your interest in addressing the ZLR Committee and, if applicable, your acceptance of any town and/or staff recommended conditions of approval on the proposal.

Wish to Speak in Support

I Understand and Accept the Recommended Conditions

Wish to Register in Support

I Do Not Understand and/or Accept the Recommended Conditions

Available for Information

Please use the space below to provide a brief summary of any comments, concerns, or observations you would like to share with the ZLR Committee regarding the proposal.

NOTE: THIS MEETING REGISTRATION FORM IS ONLY FOR APPLICANTS OR THEIR AGENTS!

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REMOTE MEETING PUBLIC REGISTRATION FORM

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DATE of Meeting: 10/12/21

Your Name: Gerald Gurtner

Your Mailing Address: 7236 Squire Cir

Your Phone #: 6088291959

Zoning Petition/CUP#: 11671

Your Email Address: j.gurtner@charter.net

Please check the appropriate box(es) below to indicate your position on the proposal.

Wish to Speak in Support

Wish to Speak in Opposition

Wish to Register in Support

Wish to Register in Opposition

Available for Information

Please use the space below to provide a brief summary of your comments and/or concerns regarding the proposal.

I have lived in Hickory Woods for over 20 years and I am strongly opposed to rezoning this property to RR-4. The last thing that I want to see is a field full of chickens, sheep, pigs or cows in my backyard! There's enough stink in the air with the corporate farms in the area, I don't need nor do I want more of it bordering on my property!

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DATE of Meeting: 10/12/21

Your Name: Daniel Birrenkott

Your Mailing Address: P.O. Box 237

Sun Prairie, WI 53590

Your Phone #: 608 237-7463

Zoning Petition/CUP#: DCPREZ-2021-11710

Your Email Address: dbirrenkott@birrenkottsurveying.com

Please check all appropriate boxes below to indicate your interest in addressing the ZLR Committee and, if applicable, your acceptance of any town and/or staff recommended conditions of approval on the proposal.

Wish to Speak in Support

I Understand and Accept the Recommended Conditions

Wish to Register in Support

I Do Not Understand and/or Accept the Recommended Conditions

Available for Information

Please use the space below to provide a brief summary of any comments, concerns, or observations you would like to share with the ZLR Committee regarding the proposal.

[Empty box for comments]

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DATE of Meeting: 10/12/2021

Your Name: Donald Viney

Your Mailing Address: 2093 US Hwy 12-18

Cottage Grove, WI 53527

Your Phone #: 608-628-4653

Zoning Petition/CUP#: 11710

Your Email Address: viney.marilyn@gmail.com

Please check all appropriate boxes below to indicate your interest in addressing the ZLR Committee and, if applicable, your acceptance of any town and/or staff recommended conditions of approval on the proposal.

Wish to Speak in Support

I Understand and Accept the Recommended Conditions

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[Empty box for comments]

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DATE of Meeting: 10/12/21

Your Name: RICHARD SUREK

Your Mailing Address: 8449 AIRPORT RD

MIDDLETON, WI 53562

Your Phone #: 608-219-0791

Zoning Petition/CUP#: 11735

Your Email Address: RICHSUREK@GMAIL.COM

Please check all appropriate boxes below to indicate your interest in addressing the ZLR Committee and, if applicable, your acceptance of any town and/or staff recommended conditions of approval on the proposal.

Wish to Speak in Support

I Understand and Accept the Recommended Conditions

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DATE of Meeting: 10/12/21

Your Name: Ronald R Klaas

Your Mailing Address: 7530 Westward Way

Madison, WI 53717

Your Phone #: 608-833-7530

Zoning Petition/CUP#: 11741

Your Email Address: rklaas@donofrio.cc

Please check all appropriate boxes below to indicate your interest in addressing the ZLR Committee and, if applicable, your acceptance of any town and/or staff recommended conditions of approval on the proposal.

Wish to Speak in Support

I Understand and Accept the Recommended Conditions

Wish to Register in Support

I Do Not Understand and/or Accept the Recommended Conditions

Available for Information

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our office is assisting the Temkins with the CSM and rezone. Harvey has asked me to represent him at this meeting, and I will be available to answer any questions.

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Please submit completed forms by email at your earliest convenience. Attach your completed form to an email and send to: lane.roger@countyofdane.com.

DATE of Meeting: October 12, 2021

Your Name: Mishpachya, LLC by Harley L. Kemkin
Your Mailing Address: 1622 Lindale Lane Green Bay, WI 54313

Your Phone #: 312-340-0261

Zoning Petition/CUP#: 11741

Your Email Address: htemkin1152@gmail.com

Please check all appropriate boxes below to indicate your interest in addressing the ZLR Committee and, if applicable, your acceptance of any town and/or staff recommended conditions of approval on the proposal.

- Wish to Speak in Support
- Understand and Accept the Recommended Conditions
- Wish to Register in Support
- I Do Not Understand and/or Accept the Recommended Conditions
- Available for Information

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DATE of Meeting: October 12, 2021

Your Name: Jane Cisler, Jim Cisler, Kevin Thome

Your Mailing Address: 3051 Shaw Ct

Madison, WI 53711

Your Phone #: 6082865804

Zoning Petition/CUP#: 2531

Your Email Address: janecisler@gmail.com

Please check all appropriate boxes below to indicate your interest in addressing the ZLR Committee and, if applicable, your acceptance of any town and/or staff recommended conditions of approval on the proposal.

Wish to Speak in Support

I Understand and Accept the Recommended Conditions

Wish to Register in Support

I Do Not Understand and/or Accept the Recommended Conditions

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