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. 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: May 12, 2020	Your Name: Ryan Spies
	Your Mailing Address: PO Box 1818
	Janesville, WI 53547
	Your Phone #: (608) 289-3281
Zoning Petition/CUP#: 02492	Your Email Address: rspies@rockroads.com
	licate your interest in addressing the ZLR Committee and, if 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 sum to share with the ZLR Committee regarding the pr	mary of any comments, concerns, or observations you would like roposal.
came up with conditions that more than cover any	ne proposed CUP. We addressed any issues with the Town and reliability for the Town's stand point. I can be available via zoom f my CUP will be in the group that gets voted for approval as a

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

This registration form may be used by the ZLR Committee to assist in determining if your proposal is eligible for inclusion on a consent agenda. Multiple zoning petitions on a consent agenda may be recommended for approval through a single motion of the committee, thus expediting the meeting.

To be eligible for inclusion on a consent agenda, there must be:

- 1. No public opposition to the proposal;
- 2. No unresolved questions/issues by committee members or staff;
- 3. Town action has been received and no concerns noted by the town in their approval;
- 4. Applicant acknowledgment and acceptance of any recommended conditions

More information and updates can be found on our website: plandev.countyofdane.com



DANE COUNTY ZONING & LAND REGULATION COMMITTEE

REMOTE MEETING PUBLIC REGISTRATION FORM

E of Meeting: May 12, 2020	Your Name: Jerry & Park Gerst Your Mailing Address: 3145 County AB
	mcFarland wi
	Your Phone #: 1608-358-91692
ing Petition/CUP#: 2492	Your Email Address: jpgerstl@yahop.c
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 bri proposal.	Available for Information ief summary of your comments and/or concerns regarding the
Please use the space below to provide a bri proposal.	Available for Information ief summary of your comments and/or concerns regarding the
Please use the space below to provide a bri proposal.	Available for Information ief summary of your comments and/or concerns regarding the
Please use the space below to provide a bri proposal.	Available for Information ief summary of your comments and/or concerns regarding the
Please use the space below to provide a bri proposal.	Available for Information ief summary of your comments and/or concerns regarding the
Please use the space below to provide a bri proposal.	Available for Information

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. 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: May 12, 2020	Your Name: Sheena Amble
	Your Mailing Address: 2215 S Fish Hatchery Rd
	Fitchburg WI 53575
	Your Phone #: 815-621-6258
Zoning Petition/CUP#: 11530	Your Email Address: madisoncommercial@frontier
	ate your interest in addressing the ZLR Committee and, if raff recommended conditions of approval on the proposal.
Wish to Speak in Support I U	Inderstand and Accept the Recommended Conditions
Wish to Register in Support	Oo Not Understand and/or Accept the Recommended Conditions
Available for Information	
Please use the space below to provide a brief summa to share with the ZLR Committee regarding the prop	ry of any comments, concerns, or observations you would like osal.
I am available for a 5 minute or less overview of prorequested.	perty plans. I will also be available for any other information

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

This registration form may be used by the ZLR Committee to assist in determining if your proposal is eligible for inclusion on a consent agenda. Multiple zoning petitions on a consent agenda may be recommended for approval through a single motion of the committee, thus expediting the meeting.

To be eligible for inclusion on a consent agenda, there must be:

- 1. No public opposition to the proposal;
- 2. No unresolved questions/issues by committee members or staff;
- 3. Town action has been received and no concerns noted by the town in their approval;
- 4. Applicant acknowledgment and acceptance of any recommended conditions

REMOTE MEETING PUBLIC REGISTRATION FORM

DATE of Meeting: May 12, 2020	Your Name: Jeanne & Wayn Hook
	Your Mailing Address: 1386 Storytown Road
	Oregon, WI 53575
	Your Phone #: 608-835-5530
Zoning Petition/CUP#: 11530	Your Email Address: jeanne1386@yahoo.com
Please check the appropriate box(es) below	w 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
Avail	lable for Information
Please use the space below to provide a brief sur proposal.	mmary of your comments and/or concerns regarding the
- Increase traffic on an already busy road	n-site they could work 24/7 oading what will they offer?

REMOTE MEETING PUBLIC REGISTRATION FORM

I I	Your Name: Michael & Kathy Rezac
	Your Mailing Address: 1385 Storytown Road
	Oregon, WI 53575
	Your Phone #: 608-335-0556
oning Petition/CUP#: 11530	Your Email Address: debnerk@hotmail.com
Please check the appropriate box(es) below	ow 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
Ava	silable for Information
Please use the space below to provide a brief su	ummary of your comments and/or concerns regarding the
proposal.	

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. 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: May 12, 2020	Your Name: James Lindau		
	Your Mailing Address: 321 Cheyenne Trail		
	Madison WI		
	Your Phone #: 6086956082		
Zoning Petition/CUP#: 11525	Your Email Address: jlindau@trachte.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	nderstand and Accept the Recommended Conditions		
Wish to Register in Support I D	o Not Understand and/or Accept the Recommended Conditions		
Available for Information			
Please use the space below to provide a brief summator to share with the ZLR Committee regarding the prop	ry of any comments, concerns, or observations you would like osal.		

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

This registration form may be used by the ZLR Committee to assist in determining if your proposal is eligible for inclusion on a consent agenda. Multiple zoning petitions on a consent agenda may be recommended for approval through a single motion of the committee, thus expediting the meeting.

To be eligible for inclusion on a consent agenda, there must be:

- 1. No public opposition to the proposal;
- 2. No unresolved questions/issues by committee members or staff;
- 3. Town action has been received and no concerns noted by the town in their approval;
- 4. Applicant acknowledgment and acceptance of any recommended conditions

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. 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: May 12, 2020	Your Name: Randy Brockmann/Jim Gavin
	Your Mailing Address: 120 W. Division St.
	Mazomanie WI 53560
	Your Phone #: 608-712-2617
Zoning Petition/CUP#: 11526	Your Email Address: jim@gavinbros.com
11 1	ate your interest in addressing the ZLR Committee and, if taff recommended conditions of approval on the proposal.
Wish to Speak in Support	Understand and Accept the Recommended Conditions
Wish to Register in Support	Do Not Understand and/or Accept the Recommended Conditions
Available for Information	
Please use the space below to provide a brief summa to share with the ZLR Committee regarding the prop	ary of any comments, concerns, or observations you would like bosal.

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

This registration form may be used by the ZLR Committee to assist in determining if your proposal is eligible for inclusion on a consent agenda. Multiple zoning petitions on a consent agenda may be recommended for approval through a single motion of the committee, thus expediting the meeting.

To be eligible for inclusion on a consent agenda, there must be:

- 1. No public opposition to the proposal;
- 2. No unresolved questions/issues by committee members or staff;
- 3. Town action has been received and no concerns noted by the town in their approval;
- 4. Applicant acknowledgment and acceptance of any recommended conditions

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. 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: May 12, 2020	Your Name: Jacob and Joe Eugster
	Your Mailing Address: 3865 WI-138
	Stoughton, WI 53589
	Your Phone #: (608)669-2734
Zoning Petition/CUP#: 11527	Your Email Address: jacob.eugster@screaminacres.o
그 없어지는 하는 것이 없다면 하는데 가게 하면 모양에 되고 바람이라면서 이 세계에 되어 되었다. 그는 그리고 아니는 사람이 그리고 하는데 없는데 그렇게 되었다.	dicate your interest in addressing the ZLR Committee and, if r 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 sum to share with the ZLR Committee regarding the p	amary of any comments, concerns, or observations you would like proposal.
	land will impose upon the rezone petition 11527 at Eugster's Farm o any unforeseen conditions the Town of Rutland might come up

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

This registration form may be used by the ZLR Committee to assist in determining if your proposal is eligible for inclusion on a consent agenda. Multiple zoning petitions on a consent agenda may be recommended for approval through a single motion of the committee, thus expediting the meeting.

To be eligible for inclusion on a consent agenda, there must be:

- 1. No public opposition to the proposal;
- 2. No unresolved questions/issues by committee members or staff;
- 3. Town action has been received and no concerns noted by the town in their approval;
- 4. Applicant acknowledgment and acceptance of any recommended conditions

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. 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: May 12, 2020	Your Name: Stephanie Zwettler, Town of Black Earth
	Your Mailing Address: PO Box 426
	Black Earth, WI 53515
	Your Phone #: 608-444-6425
Zoning Petition/CUP#: 11528	Your Email Address: townofblackearthclerk@gmail
11 1	ate your interest in addressing the ZLR Committee and, if taff recommended conditions of approval on the proposal.
Wish to Speak in Support	Understand and Accept the Recommended Conditions
Wish to Register in Support	Do Not Understand and/or Accept the Recommended Conditions
✓ Available for Information	
Please use the space below to provide a brief summa to share with the ZLR Committee regarding the prop	ary of any comments, concerns, or observations you would like

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

This registration form may be used by the ZLR Committee to assist in determining if your proposal is eligible for inclusion on a consent agenda. Multiple zoning petitions on a consent agenda may be recommended for approval through a single motion of the committee, thus expediting the meeting.

To be eligible for inclusion on a consent agenda, there must be:

- 1. No public opposition to the proposal;
- 2. No unresolved questions/issues by committee members or staff;
- 3. Town action has been received and no concerns noted by the town in their approval;
- 4. Applicant acknowledgment and acceptance of any recommended conditions

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. 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:	Your Name: Caroline Towle Allen
	Your Mailing Address: 909 County Road V
	Marshall
	Your Phone #: 608-630-5082
Zoning Petition/CUP#: 11529	Your Email Address: CTowle06@gmail.com
	ate your interest in addressing the ZLR Committee and, if taff recommended conditions of approval on the proposal.
Wish to Speak in Support	Understand and Accept the Recommended Conditions
Wish to Register in Support	Oo Not Understand and/or Accept the Recommended Conditions
Available for Information	
Please use the space below to provide a brief summa to share with the ZLR Committee regarding the prop	ary of any comments, concerns, or observations you would like bosal.

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

This registration form may be used by the ZLR Committee to assist in determining if your proposal is eligible for inclusion on a consent agenda. Multiple zoning petitions on a consent agenda may be recommended for approval through a single motion of the committee, thus expediting the meeting.

To be eligible for inclusion on a consent agenda, there must be:

- 1. No public opposition to the proposal;
- 2. No unresolved questions/issues by committee members or staff;
- 3. Town action has been received and no concerns noted by the town in their approval;
- 4. Applicant acknowledgment and acceptance of any recommended conditions

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. 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: May 12, 2020	Your Name: Cindy Cutrano
	Your Mailing Address: 300 US Hwy 12 and 18
	Cambridge, WI 53523
	Your Phone #: 608-219-9101
Zoning Petition/CUP#: 11531	Your Email Address: subaruheaven@yahoo.com
	ate your interest in addressing the ZLR Committee and, if raff recommended conditions of approval on the proposal.
Wish to Speak in Support	Inderstand and Accept the Recommended Conditions
Wish to Register in Support	Oo Not Understand and/or Accept the Recommended Conditions
✓ Available for Information	
Please use the space below to provide a brief summa to share with the ZLR Committee regarding the prop	ry of any comments, concerns, or observations you would like losal.

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

This registration form may be used by the ZLR Committee to assist in determining if your proposal is eligible for inclusion on a consent agenda. Multiple zoning petitions on a consent agenda may be recommended for approval through a single motion of the committee, thus expediting the meeting.

To be eligible for inclusion on a consent agenda, there must be:

- 1. No public opposition to the proposal;
- 2. No unresolved questions/issues by committee members or staff;
- 3. Town action has been received and no concerns noted by the town in their approval;
- 4. Applicant acknowledgment and acceptance of any recommended conditions

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. 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: May 12, 2020	Your Name: SCOTT ZAHLER
	Your Mailing Address: 8854 OFFERDAHL RD
	MT HOREB WI 53572
	Your Phone #: 608-220-8248
Zoning Petition/CUP#: 2020-11532	Your Email Address: SCOTTZ@PREMIERBUILDI
	e your interest in addressing the ZLR Committee and, if frecommended conditions of approval on the proposal.
Wish to Speak in Support I Un	derstand 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 to share with the ZLR Committee regarding the propos	of any comments, concerns, or observations you would like sal.
Both properties are owned by my wife and myself, (We Maintain Lot 1 as a buildable/sellable parcel. This has	Tendy and Scott Zahler). Add 1 acre to Lot 2 from Lot 1. s been approved by the Town of Primrose.

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

This registration form may be used by the ZLR Committee to assist in determining if your proposal is cligible for inclusion on a consent agenda. Multiple zoning petitions on a consent agenda may be recommended for approval through a single motion of the committee, thus expediting the meeting.

To be eligible for inclusion on a consent agenda, there must be:

- 1. No public opposition to the proposal;
- 2. No unresolved questions/issues by committee members or staff;
- 3. Town action has been received and no concerns noted by the town in their approval;
- 4. Applicant acknowledgment and acceptance of any recommended conditions

REMOTE MEETING PUBLIC REGISTRATION FORM

DATE of Meeting: May 12, 2020	Your Name: Kris Hampton
	Your Mailing Address: Town of Cottage Grove
	Your Phone #: 608-279-4470
Zoning Petition/CUP#: 11533	Your Email Address: khampton@towncg.net
Please check the appropriate box(es	s) 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 biproposal.	rief summary of your comments and/or concerns regarding the

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. 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: May 12, 2020	Your Name: Marc Schellpfeffer	
	Your Mailing Address: 4414 Regent St. Suite 102	
	Madison, WI 53705	
	Your Phone #: 608-215-2607	
Zoning Petition/CUP#: 11534	Your Email Address: marc@cas4arch.com	
11 1	e your interest in addressing the ZLR Committee and, if frecommended conditions of approval on the proposal.	
Wish to Speak in Support I Und	derstand and Accept the Recommended Conditions	
Wish to Register in Support	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!

This registration form may be used by the ZLR Committee to assist in determining if your proposal is eligible for inclusion on a consent agenda. Multiple zoning petitions on a consent agenda may be recommended for approval through a single motion of the committee, thus expediting the meeting.

To be eligible for inclusion on a consent agenda, there must be:

- 1. No public opposition to the proposal;
- 2. No unresolved questions/issues by committee members or staff;
- 3. Town action has been received and no concerns noted by the town in their approval;
- 4. Applicant acknowledgment and acceptance of any recommended conditions

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

Your Name: Dennis Richardson	
Your Mailing Address: 2561 Coffeytown Road	
Cottage Grove, WI 53527	
Your Phone #: 608-209-6647	
Your Email Address: drichardson@rghuston.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.	
derstand and Accept the Recommended Conditions	
Not Understand and/or Accept the Recommended Conditions	
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!

This registration form may be used by the ZLR Committee to assist in determining if your proposal is eligible for inclusion on a consent agenda. Multiple zoning petitions on a consent agenda may be recommended for approval through a single motion of the committee, thus expediting the meeting.

To be eligible for inclusion on a consent agenda, there must be:

- 1. No public opposition to the proposal;
- 2. No unresolved questions/issues by committee members or staff;
- 3. Town action has been received and no concerns noted by the town in their approval;
- 4. Applicant acknowledgment and acceptance of any recommended conditions

REMOTE MEETING PUBLIC REGISTRATION FORM

DATE of Meeting: May 12, 2020	Your Name: Kris Hampton
S [15	Your Mailing Address: Town of Cottage Grove
	Your Phone #: 608-279-4470
Zoning Petition/CUP#: 11535	Your Email Address: khampton@towncg.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 bri-	ef summary of your comments and/or concerns regarding the

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. 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: May 12, 2020	Your Name: Cory Clemens
<u> </u>	Your Mailing Address: 7857 Dunroven Road
	Town of Vienna
	Your Phone #: (608) 212-7327
Zoning Petition/CUP#: 11536	Your Email Address: corykori5@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	Inderstand and Accept the Recommended Conditions
Wish to Register in Support	Oo 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.	
Accept the condition: The SFR-1 and two LC prope	erties are prohibited from being separated.

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

This registration form may be used by the ZLR Committee to assist in determining if your proposal is eligible for inclusion on a consent agenda. Multiple zoning petitions on a consent agenda may be recommended for approval through a single motion of the committee, thus expediting the meeting.

To be eligible for inclusion on a consent agenda, there must be:

- 1. No public opposition to the proposal;
- 2. No unresolved questions/issues by committee members or staff;
- 3. Town action has been received and no concerns noted by the town in their approval;
- 4. Applicant acknowledgment and acceptance of any recommended conditions

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. 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: May 12, 2020	Your Name: Brent Darley
	Your Mailing Address: 575 Toepfer Ave
	Madison, WI 53711
	Your Phone #: 608-575-5333
Zoning Petition/CUP#: 11537	Your Email Address: bkdarley@gmail.com
11 1	ow to indicate your interest in addressing the ZLR Committee and, if on 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.

My wife, Dana Resop, and I purchased her family's farmhouse and 2 acres from her parents who still own the surrounding 320 acre farm where Dana lived for 30 years. We intend to continue farming with them and plan to purchase or inherit the rest of the farm in a typical family farm succession process. We want to start full renovation of farm house this year to live there, but discovered when applying for building permit the 2 acre lot does not have a certified survey map and was not zoned to be sold separately (it's still AT-35), even though we already have the deed in our name. The lot was split off in 1977 by previous owners before Resops, but survey map was not certified. Also, the lot was incorrectly described to include part of the public driveway and easement, so actual lot is only 1.7 acres. We ask to please rezone this lot to RR-1 so we may apply for building permit to renovate house.

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

This registration form may be used by the ZLR Committee to assist in determining if your proposal is eligible for inclusion on a consent agenda. Multiple zoning petitions on a consent agenda may be recommended for approval through a single motion of the committee, thus expediting the meeting.

To be eligible for inclusion on a consent agenda, there must be:

- 1. No public opposition to the proposal;
- 2. No unresolved questions/issues by committee members or staff;
- 3. Town action has been received and no concerns noted by the town in their approval;
- 4. Applicant acknowledgment and acceptance of any recommended conditions

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. 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: May 12, 2020	Your Name: Donald Viney
8	Your Mailing Address: 2093 US Highway 12-18
4	Cottage Grove, WI 53527
	Your Phone #: 608-628-4653
Zoning Petition/CUP#: 11538	Your Email Address: dmviney@hughes.net
18 - 10 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	icate your interest in addressing the ZLR Committee and, if 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	
Please use the space below to provide a brief sumr to share with the ZLR Committee regarding the pr	mary of any comments, concerns, or observations you would like oposal.
are wanting to put a home in a wooded area and or remain in ag preservation, rather than the propose dead end with no access to Highway 12 & 18. We	ir only interest is to protect the good farmland, which is why we in the poorest soil on the land. We would like to see the land d commercial. Future plans for Sigglekow Road are for it to be a see have the support of the five neighbors that are adjacent to the spoke in favor of the change. They were James Ewing and Rod you for your consideration.

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

This registration form may be used by the ZLR Committee to assist in determining if your proposal is eligible for inclusion on a consent agenda. Multiple zoning petitions on a consent agenda may be recommended for approval through a single motion of the committee, thus expediting the meeting.

To be eligible for inclusion on a consent agenda, there must be:

- 1. No public opposition to the proposal;
- 2. No unresolved questions/issues by committee members or staff;
- Town action has been received and no concerns noted by the town in their approval;
- 4. Applicant acknowledgment and acceptance of any recommended conditions

REMOTE MEETING PUBLIC REGISTRATION FORM

OATE of Meeting: May 12, 2020	Your Name: Kris Hampton
	Your Mailing Address: Town of Cottage Grove
	Your Phone #: 608-279-4470
Coning Petition/CUP#: 11538	Your Email Address: khampton@towncg.net
Please check the appropriate box(es	b) 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 br proposal.	rief summary of your comments and/or concerns regarding the

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. 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: May 12, 2020	Your Name: Ben Kollenbroich
	Your Mailing Address: 4156 County Road B
	McFarland, WI
	Your Phone #: 773-415-8682
Zoning Petition/CUP#: 11539	Your Email Address: bkollenbroich@town.dunn.wi
11 1	ate your interest in addressing the ZLR Committee and, if taff recommended conditions of approval on the proposal.
Wish to Speak in Support	Inderstand and Accept the Recommended Conditions
Wish to Register in Support	Oo 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!

This registration form may be used by the ZLR Committee to assist in determining if your proposal is eligible for inclusion on a consent agenda. Multiple zoning petitions on a consent agenda may be recommended for approval through a single motion of the committee, thus expediting the meeting.

To be eligible for inclusion on a consent agenda, there must be:

- 1. No public opposition to the proposal;
- 2. No unresolved questions/issues by committee members or staff;
- 3. Town action has been received and no concerns noted by the town in their approval;
- 4. Applicant acknowledgment and acceptance of any recommended conditions

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. 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:	Your Name: Cathy Hasslinger
	Your Mailing Address: 2525 Tower Rd
	Your Phone #: 608-206-1435
Zoning Petition/CUP#: 11539	Your Email Address: chasslinger@town.dunn.wi.
	eate your interest in addressing the ZLR Committee and, if taff recommended conditions of approval on the proposal.
Wish to Speak in Support	Understand and Accept the Recommended Conditions
✓ Wish to Register in Support I I	Do Not Understand and/or Accept the Recommended Conditions
Available for Information	
Please use the space below to provide a brief summator share with the ZLR Committee regarding the projection.	ary of any comments, concerns, or observations you would like posal.
Blanket rezone	

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

This registration form may be used by the ZLR Committee to assist in determining if your proposal is eligible for inclusion on a consent agenda. Multiple zoning petitions on a consent agenda may be recommended for approval through a single motion of the committee, thus expediting the meeting.

To be eligible for inclusion on a consent agenda, there must be:

- 1. No public opposition to the proposal;
- 2. No unresolved questions/issues by committee members or staff;
- 3. Town action has been received and no concerns noted by the town in their approval;
- 4. Applicant acknowledgment and acceptance of any recommended conditions