

First Name	Last Name	City	Petition #	Support or oppose?	Do you want to speak?
Jeff	Riegert	Mcfarland	2558	Support	Yes, I want to speak.
Heather	Dyer	Cottage Grove	2559	Support	I do not want to speak but I am available for questions.
Christopher	Dyer	Cottage Grove	2559	Support	I do not want to speak but I am available for questions.
Joseph	Bartol	Madison	2559	Support	I do not want to speak but I am available for questions.
Stephan	Mesdjian	McFarland	2560	Support	Yes, I want to speak.
Jessina	Graham	mcfarland	2560	Oppose	Yes, I want to speak.
Bryce	Sime	Stoughton	11813	Support	I do not want to speak but I am available for questions.
Jayne	Seibel	Stoughton	11813	Neither	I do not want to speak but I am available for questions.
jason	kirch	sauk city	11814	Support	I do not want to speak but I am available for questions.
Dale & Vicki	Gullickson	Sauk City	11814	Support	No, I do not want to speak.
Kara	Gullickson	Sauk City	11814	Support	No, I do not want to speak.
John	Morschauser	Deerfield	11815	Support	I do not want to speak but I am available for questions.
Stanley	Lyon	Oregon, WI	11817	Support	I do not want to speak but I am available for questions.
Kelsey	Bailey	Oregon	11817	Support	I do not want to speak but I am available for questions.
Filip	Sanna	Belleville	11818	Support	I do not want to speak but I am available for questions.
Lexie	Harris	New Glarus	11818	Support	I do not want to speak but I am available for questions.
John	Johnson	Verona	11819	Support	I do not want to speak but I am available for questions.
June	Brown	Middleton	11819	Support	I do not want to speak but I am available for questions.
Nicholas	Jameson	stoughton	11820	Support	I do not want to speak but I am available for questions.
Aaron	Koch	Brookfield	11820	Support	I do not want to speak but I am available for questions.
Rich	Bonjour	Lodi	11821	Support	I do not want to speak but I am available for questions.
Jeff	Auby	Stoughton	11822	Support	I do not want to speak but I am available for questions.
Christopher	Conrad	Monona	11823	Support	I do not want to speak but I am available for questions.
Dale	Kunin	Verona	11823	Oppose	No, I do not want to speak.
Scott	Ahlman	Verona	11823	Oppose	Yes, I want to speak.
Derek	Schnabel	Verona	11824	Support	I do not want to speak but I am available for questions.
Nathan	Lockwood	Madison	11824	Support	I do not want to speak but I am available for questions.
j	hanson	madison	N/A	Neither	No, I do not want to speak.

**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.  
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**DATE of Meeting:** May 10, 2022

**Your Name:** Bruce Sime

**Your Mailing Address:** [REDACTED]  
Stoughton WI 53589

**Your Phone #:** [REDACTED]

**Zoning Petition/CUP#:** 11813

**Your Email Address:** [REDACTED]

**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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DATE of Meeting: 05-10-22

Your Name: John O. Marschauer  
Marschauer Family Trust

Your Mailing Address: [Redacted]  
Dressfield, WI 53531

Your Phone #: [Redacted]

Zoning Petition/CUP#: 11815 11816

Your Email Address: [Redacted]

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
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[Empty box for comments]

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DATE of Meeting: 05-10-22

Your Name: John O. Marschauer  
Marschauer Family Trust

Your Mailing Address: [Redacted]  
Dressfield, WI 53531

Your Phone #: [Redacted]

Zoning Petition/CUP#: 11815 11816

Your Email Address: [Redacted]

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[Empty box for comments]

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**DATE of Meeting:**

Your Name:

W Sw Bailey

Your Mailing Address:

[REDACTED]

Dreghn, WI 53575

Your Phone #:

[REDACTED]

Zoning Petition/CUP#:

11817

Your Email Address:

[REDACTED]

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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DATE of Meeting: 5/10/22

Your Name: Filip Sanna

Your Mailing Address: [REDACTED]

New Glarus, WI 53574

Your Phone #: [REDACTED]

Zoning Petition/CUP#: 11818

Your Email Address: [REDACTED]

**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.**

- |   |   |
|---|---|
| <input type="checkbox"/> Wish to Speak in Support               | <input type="checkbox"/> I Understand and Accept the Recommended Conditions           |
| <input checked="" type="checkbox"/> Wish to Register in Support | <input type="checkbox"/> I Do Not Understand and/or Accept the Recommended Conditions |
| <input checked="" type="checkbox"/> 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.

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**REMOTE MEETING PUBLIC REGISTRATION FORM**

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**DATE of Meeting:** 5/10/22

**Your Name:** June Brown

**Your Mailing Address:**

Middleton, WI 53562

**Your Phone #:**

**Zoning Petition/CUP#:** Rezone 11819

**Your Email Address:**

**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 am available to simply provide any additional context needed for the re-zoning of the adjacent parcel to my parcel.

DANE COUNTY ZONING & LAND REGULATION COMMITTEE

REMOTE MEETING APPLICANT REGISTRATION FORM

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DATE of Meeting: 5-10-2022

Your Name: John T. Johnson

Your Mailing Address: [REDACTED]

Verona WI 53593

Your Phone #: [REDACTED]

Zoning Petition/CUP#: 11819

Your Email Address: [REDACTED]

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.

Town of Middleton has approved the rezone.

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DATE of Meeting: May 10, 2022  
Your Name: Jameson Rentals LLC  
Nicholas Jameson  
Your Mailing Address: [REDACTED]  
Stoughton, WI 53589  
Your Phone #: [REDACTED]  
Your Email Address: [REDACTED]  
Zoning Petition/CUP#: 11820

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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**DANE COUNTY ZONING & LAND REGULATION COMMITTEE**

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**DATE of Meeting:** 5/10/22

**Your Name:** Richard Bonjour (POA for Louann Bonjour)

**Your Mailing Address:** [REDACTED]

[REDACTED]

**Your Phone #:** 6 [REDACTED]

**Zoning Petition/CUP#:** Petition 11821

**Your Email Address:** [REDACTED]

**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.

Mailing address above is for Richard Bonjour, POA for Louann Bonjour (Robert Bonjour is deceased). Property subject to Petition 11821 is 7050 Taylor Rd, Sauk City, WI 53583, in the township of Roxbury.

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DATE of Meeting: 4/26/22

Your Name: Jeff Auby

Your Mailing Address: [REDACTED]

Stoughton, WI 53589

Your Phone #: [REDACTED]

Zoning Petition/CUP#: 11822

Your Email Address: [REDACTED]

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.

- |   |  |
|---|--|
| <input type="checkbox"/> Wish to Speak in Support               | <input checked="" type="checkbox"/> I Understand and Accept the Recommended Conditions |
| <input checked="" type="checkbox"/> Wish to Register in Support | <input type="checkbox"/> I Do Not Understand and/or Accept the Recommended Conditions  |
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**DATE of Meeting:** May 10th at 6:30pm

**Your Name:** Michael L Schmitz

**Your Mailing Address:**

Verona, WI 53593

**Your Phone #:**

**Zoning Petition/CUP#:** 11823

**Your Email Address:**

**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.

My real estate broker, Chris Conrad, will be attending remotely on my behalf. I will also attempt to attend but may be unable. Chris will be available and has my permission to answer any questions as my agent. His phone # is [REDACTED] and his email address is: [REDACTED] If possible, please CC Chris on any email communications that are sent to me. Thanks!

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**DATE of Meeting:** 5/10/22

**Your Name:** Jeffrey Riegert

**Your Mailing Address:**

Mcfarlamnd WI 53558

**Your Phone #:**

**Zoning Petition/CUP#:** 02558

**Your Email Address:**

**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

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**DATE of Meeting:** 5/10/22

**Your Name:** Joseph P. Bartol

**Your Mailing Address:** [REDACTED]

Madison WI 53703-2236

**Your Phone #:** [REDACTED]

**Zoning Petition/CUP#:** 02559

**Your Email Address:** [REDACTED]

**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.**

- |   |   |
|---|---|
| <input type="checkbox"/> Wish to Speak in Support               | <input type="checkbox"/> I Understand and Accept the Recommended Conditions           |
| <input checked="" type="checkbox"/> Wish to Register in Support | <input type="checkbox"/> I Do Not Understand and/or Accept the Recommended Conditions |
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**DATE of Meeting:** 5/10/22

**Your Name:** Christopher & Heather Dyer

**Your Mailing Address:** [REDACTED]

Cottage Grove, WI 53527

**Your Phone #:** [REDACTED]

**Zoning Petition/CUP#:** 02559

**Your Email Address:** [REDACTED]

**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!**

**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**

**Petitions without town action may also be included on a consent agenda and recommended for postponement to a future meeting.**

**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](mailto:lane.roger@countyofdane.com).

**DATE of Meeting:** 5/10/22

**Your Name:** Stephan Mesdjian

**Your Mailing Address:**

McFarland, WI 53558

**Your Phone #:**

**Zoning Petition/CUP#:** CUP 2560

**Your Email Address:**

**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.

I would like to speak in support of CUP 2560 and be available to answer any questions the ZLR Committee may have.

**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**

**Petitions without town action may also be included on a consent agenda and recommended for postponement to a future meeting.**



**DANE COUNTY ZONING & LAND REGULATION COMMITTEE**

**REMOTE MEETING PUBLIC REGISTRATION FORM**

Members of the public 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:**

**Your Name:** Jessina Graham

**Your Mailing Address:**

McFarland, WI 53558

**Your Phone #:**

**Zoning Petition/CUP#:** 2560

**Your Email Address:**

**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 submitted a statement, but there have been several violations with this STR, and he is just now attempting to obtain this CUP despite running a STR for years. I have concerns about approving this CUP without appropriate monitoring that would include neighbors notations and problems. As a neighbor I was not notified of this STR until this CUP application was filed.