

Dane County Rezone & Conditional Use Permit

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|----------------------------|------------------------|
| Application Date | Petition Number |
| 04/02/2019 | DCPREZ-2018-11390 |
| Public Hearing Date | C.U.P. Number |
| 03/26/2019 | |

| OWNER INFORMATION | | AGENT INFORMATION | |
|--|--|--|--|
| OWNER NAME RUSSELL J POHLMAN | PHONE (with Area Code) (608) 764-8071 | AGENT NAME DAVE DINKEL | PHONE (with Area Code) (608) 764-5451 |
| BILLING ADDRESS (Number & Street) 127 COUNTY HIGHWAY BB | | ADDRESS (Number & Street) 33 N MAIN ST., | |
| (City, State, Zip) MARSHALL, WI 53559 | | (City, State, Zip) Deerfield, WI 53531 | |
| E-MAIL ADDRESS | | E-MAIL ADDRESS dave@propertyshop-realtors.com | |

| ADDRESS/LOCATION 1 | | ADDRESS/LOCATION 2 | | ADDRESS/LOCATION 3 | |
|-----------------------------------|---------------|-----------------------------------|---------------|-----------------------------------|---------|
| ADDRESS OR LOCATION OF REZONE/CUP | | ADDRESS OR LOCATION OF REZONE/CUP | | ADDRESS OR LOCATION OF REZONE/CUP | |
| 131 County Highway BB | | north of 131 CTH BB | | | |
| TOWNSHIP DEERFIELD | SECTION 12 | TOWNSHIP DEERFIELD | SECTION 12 | TOWNSHIP | SECTION |
| PARCEL NUMBERS INVOLVED | | PARCEL NUMBERS INVOLVED | | PARCEL NUMBERS INVOLVED | |
| 0712-123-9500-0 | | 0712-123-8341-5 | | | |

| REASON FOR REZONE | CUP DESCRIPTION |
|--|-----------------|
| CREATION OF A BUILDING SITE FOR OUR FAMILY MEMBERS RESIDENCE AND SMALL BUSINESS ON THE FAMILY FARM | |

| FROM DISTRICT: | TO DISTRICT: | ACRES | DANE COUNTY CODE OF ORDINANCE SECTION | ACRES |
|--|----------------------------------|-------|---------------------------------------|-------|
| FP-35 (General Farmland Preservation) District | LC (Limited Commercial District) | 4.2 | | |

| | | | | |
|---|--|--|---|---|
| C.S.M REQUIRED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Applicant Initials _____ | PLAT REQUIRED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Applicant Initials _____ | DEED RESTRICTION REQUIRED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Applicant Initials _____ | INSPECTOR'S INITIALS SCW1 | SIGNATURE:(Owner or Agent) PRINT NAME: DATE: |
|---|--|--|---|---|

COMMENTS: FEE TO BE MAILED \$636.00 PH DATE WILL BE 3/26/2019

NEW ZONING ORDINANCE CODES ADOPTED BY THE TOWN 3/11/19 CM