Dane County Rezone & Conditional Use Permit

Application Date	Petition Number
06/03/2016	DCPREZ-2016-11017
Public Hearing Date	C.U.P. Number
08/23/2016	

OWNER INFORMATION				AGENT INFORMATION			
OWNER NAME ERIN B DAMMEN		PHONE (with Area Code) (608) 220-72		AGENT NAME		PHONE (with Area Code)	
BILLING ADDRESS (Number & Street) 5571 RALPH RD			1	ADDRESS (Number & Street)			
(City, State, Zip) OREGON, WI 53575			((City, State, Zip)			
E-MAIL ADDRESS erindammen@gmail.com			E	E-MAIL ADDRESS			
ADDRESS/L	ADDR	ADDRESS/LOCATION 2 ADDRESS/LOCATION 3					
ADDRESS OR LOCATION OF REZONE/CUP		ADDRESS OR	ADDRESS OR LOCATION OF REZONE/CUP		ADDRESS OR LOCATION OF REZONE/CUP		
5571 RALPH ROAD							
TOWNSHIP OREGON	SECTION 16	TOWNSHIP		SECTION	TOWNSHIP	SECTION	
PARCEL NUMBER	RS INVOLVED	PARCEL	PARCEL NUMBERS INVOLVED		PARCEL NUMBERS INVOLVED		
0509-164-	-6258-3						
REA	ASON FOR REZO	NE			CUP DESCRIP	TION	
FROM DISTRICT:	TO DIS	TRICT: AC	RES	DANE COUNTY (CODE OF ORDINANC	E SECTION ACRES	
R-1 Residence District R-3 Residence District			, KLO	DAIL GOOKIT	ODE OF ORDINARO	2 OZOTION NONZO	
C.S.M REQUIRED?	PLAT REQUIRED	DEED RESTRICTION REQUIRED?		INSPECTOR'S INITIA			
Yes No Applicant Initials	Yes 🛭 No		a no	SSA1	PRINT NAME:	emmen	
					Erin 1 DATE: 6/3/	Dammen 16	

Form Version 03.00.03



PLANNING DEVELOPMENT

Zoning Change Application

Scaled Drawing of the location of the proposed Zoning Boundaries

Zoning Division Room 116, City-County Building 210 Martin Luther King Jr. Blvd. Madison, Wisconsin 53703-3342 Phone: (608) 266-4266

Fax: (608) 267-1540

Items that must be submitted with your application:

Written Legal Description of the proposed Zoning Boundaries
Legal description of the land that is proposed to be changed. The description may be a lot in a plat,
Certified Survey Map, or an exact metes and bounds description. A separate legal description is required for <u>each</u> zoning district proposed. The description shall include the area in acres or square feet.

The drawing shall include the existing and proposed zoning boundaries of the property. All existing buildings shall be shown on the drawing. The drawing shall include the area in acres or square feet. Owner's Name Shane & Erin Dammen Agent's Name Address Address Phone Phone exindammen@amail.com Email Email D42/0509-164-6258-3 Town: Oregon _____ Parcel numbers affected: ___ Property address or location: 5571 Ralph Rd. Section: 01 Zoning District change: (To / From / # of acres) Class I soils: _____% Class II soils: _____% Other:____ % Soil classifications of area (percentages) Narrative: (reason for change, intended land use, size of farm, time schedule) Separation of buildings from farmland 0 Creation of a residential lot 0 Compliance for existing structures and/or land uses Other: Zoning compliance to allow reduced setbacks.
Proposing to put on an addition to house. I authorize that I am the owner or have permission to act on behalf of the owner of the property. Date: 6/3/16 Submitted By: un Jammen

Parcel Number - 042/0509-164-6258-3

Current

≺ Parcel Parents

Summary Report

Parcel Detail		Less —			
Municipality Name	TOWN OF OREGON				
State Municipality Code	042				
Township & Range	Section	Quarter/Quarter & Quarter			
T05NR09E	16	SE of the SE			
Plat Name	HILLCREST HEIGHTS-1ST ADDITION				
Block/Building					
Lot/Unit	28				
Restrictive Covenants	Show Restrictions for this Plat, CSM, or Quarter				
Parcel Description	FIRST ADDITION TO HILLCREST HEIGHTS LOT 28 This property description is for tax purposes. It may be abbreviated. For the complete legal description please refer to the deed.				
Current Owner	SHANE J DAMMEN				
Current Co-Owner	ERIN B DAMMEN				
Primary Address	5571 RALPH RD				
Billing Address	5571 RALPH RD OREGON WI 53575				

