## Dane County Rezone & Conditional Use Permit

| Application Date    | Petition Number DCPREZ-2017-11201 C.U.P. Number |  |  |  |  |
|---------------------|---|--|--|--|--|
| 10/02/2017          |   |  |  |  |  |
| Public Hearing Date |   |  |  |  |  |
| 10/24/2017          |   |  |  |  |  |

| OWNER INFORMATION                                       |                |                             |                            | AGENT INFORMATION        |   |   |             |  |            |      |  |
|---|----------------|-----------------------------|----------------------------|--------------------------|---|---|-------------|--|------------|------|--|
| OWNER NAME<br>JOHN C LUBICK                             |                |                             |                            | AGENT NAME<br>JIM LOWREY |   |   |             | PHONE (with Are<br>Code)<br>(608) 334-53 |            |      |  |
| BILLING ADDRESS (Number & Street)<br>3621 N FAIR OAK RD |                |                             |                            |                          |   | SS (Number & Stree<br>BENGE HINN<br>Becal |             | RD                                       |            |      |  |
| (City, State, Zip)<br>DEERFIELD, WI 53531               |                |                             |                            |                          | (City, State, Zip)<br>CAMBRIDGE, WI 53523 |   |             |  |            |      |  |
| E-MAIL ADDRESS  |                |                             |                            |                          | E-MAIL ADDRESS JIMSREALFARM@YAHOO.COM     |   |             |  |            |      |  |
| ADDRESS/LOCATION 1                                      |                |                             | AL                         | DRESS/L                  | OCATION 2                                 |   |             | ADDRESS/LOCATION 3                       |            |      |  |
| ADDRESS OR LOCATION OF REZONE/CUP                       |                |                             | ADDRESS OR LOCATION        |                          | ION OF                                    | ON OF REZONE/CUP                          |             | ADDRESS OR LOCATION OF REZONE/CUP        |            |      |  |
| 3593 N FAIR OAK R                                       | D              |                             |                            |                          |   |   |             |  |            |      |  |
| TOWNSHIP DEERFIELD                                      |                | SECTION 26                  | FOWNSHIP                   |                          |   | SECTION                                   | ТО          | WNSHIP                                   | SECTION    |      |  |
| PARCEL NUMBERS INVOLVED                                 |                | VOLVED                      | PAR                        | CEL NUMB                 | ERS INVOLVED                              |   |             | PARCEL NUMBER                            | S INVOLVED |      |  |
| 0712-262-9540-4   |                |                             |                            |                          |   |   |             |  |            |      |  |
| REASON FOR REZONE                                       |                |                             |                            |                          |   |   | C           | UP DESCRIPTION                           |            |      |  |
|   |                |                             |                            |                          |   |   |             |  |            |      |  |
|   |                | TO DISTR                    |                            | ACRES                    |   | DANE COUNTY CO                            | ODE         | OF ORDINANCE SECT                        | TION A     | CRES |  |
| A-1Ex Exclusive Ag District  A-2 (8) Agric              |                | A-2 (8) Agricul<br>District | ture                       | 11.4                     |   |   |             |  |            |      |  |
| A-1Ex Exclusive Ag District  A-2 Agricultur             |                | District                    | 25                         |                          |   |   |             |  |            |      |  |
| C.S.M REQUIRED?   | PLAT REQUIRED? |                             | DEED RESTRICTION REQUIRED? |                          |   | INSPECTOR'S<br>INITIALS                   |             | SIGNATURE:(Owner or Agent)               |            |      |  |
| ☑ Yes ☐ No  | ☐ Yes ☑ No     |                             | ☐ Yes ☑ No                 |                          | НЈН3                                      |   |             | Lin Jan                                  | ul         |      |  |
| Applicant InitialsApplicant Initials                    |                | Applicant Initials          |                            | -                        |   | 4   | PRINT NAME: |  |            |      |  |
|   |                |                             |                            |                          |   |   |             | Jim Lou                                  | urey       |      |  |
|   |                |                             |                            |                          |   |   |             | 10-02-2                                  | 017        |      |  |

Form Version 03.00.03