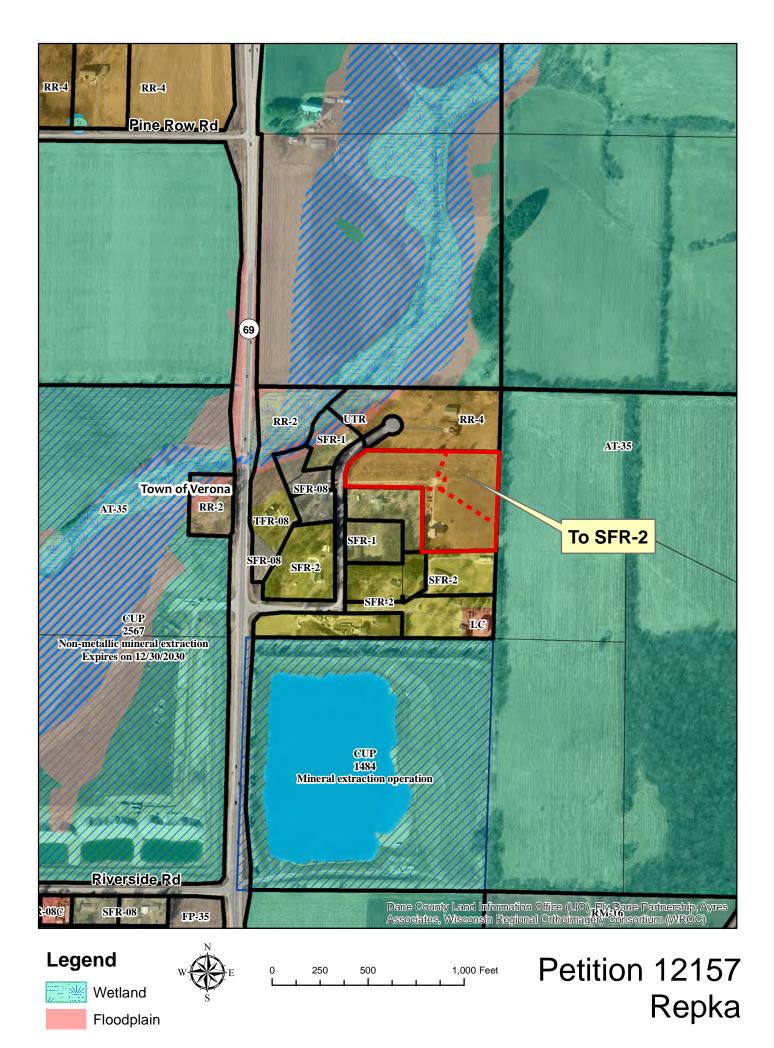
| Dane Count                               | v R       | ezone P      | etition                           |                     | Application Date        | Petition N         | umber                     |
|--|-----------|--------------|-----------------------------------|---------------------|-------------------------|--------------------|---------------------------|
|  | y iv      |              |                                   |                     | 03/05/2025              |                    |                           |
|  |           |              |                                   |                     | Public Hearing Date     | DCPREZ-20          | 25-12157                  |
|  |           |              |                                   |                     | 05/27/2025              |                    |                           |
| OV                                       | VNER      | INFORMATIC   | <b>N</b>                          |                     | AC                      | GENT INFORMATION   | 1                         |
| OWNER NAME<br>NORBERT REPKA              |           |              | PHONE (with<br>Code)<br>(608) 440 | Γ                   | GENT NAME               |                    | PHONE (with Area<br>Code) |
| BILLING ADDRESS (Numbe<br>2014 MANHATTAN |           | et)          |                                   | A<br>[              | DDRESS (Number & Stree  | et)                |                           |
| (City, State, Zip)<br>VERONA, WI 53593   | 3         |              |                                   | ((                  | City, State, Zip)       |                    |                           |
| E-MAIL ADDRESS<br>norbert_reptka@hot     | mail.c    | om           |                                   | E                   | -MAIL ADDRESS           |                    |                           |
| ADDRESS/L                                | OCAT      | TON 1        | AD                                | DRESS/LO            | OCATION 2               | ADDRESS/LO         | OCATION 3                 |
| ADDRESS OR LOCA                          |           | FREZONE      | ADDRES                            | SS OR LOCAT         | TION OF REZONE          | ADDRESS OR LOCAT   | FION OF REZONE            |
| 2014 Manhattan Dr                        |           |              |                                   |                     |                         |                    |                           |
| TOWNSHIP<br>VERONA                       |           | SECTION - 28 | TOWNSHIP                          |                     | SECTION                 | TOWNSHIP           | SECTION                   |
| PARCEL NUMBE                             | ERS INV   | OLVED        | PAR                               |                     | RS INVOLVED             | PARCEL NUMBE       | RS INVOLVED               |
| 0608-284                                 | -8440     | -2           |                                   |                     |                         |                    |                           |
|  |           |              | RE                                | EASON FOI           | R REZONE                |                    |                           |
| DIVIDING A RESIDI                        | ENTIA     | L LOT INTO T | THREE RE                          | SIDENTIA            | L LOTS                  |                    |                           |
| FR                                       |           | TRICT:       |                                   |                     | TO DI                   | STRICT:            | ACRES                     |
| RR-4 Rural Residen                       | itial Dis | strict       |                                   | SFR-2 Sir           | ngle Family Reside      | ntial District     | 6.2                       |
| C.S.M REQUIRED?                          | PLA       | T REQUIRED?  |                                   | STRICTION<br>JIRED? | INSPECTOR'S<br>INITIALS | SIGNATURE:(Owner o | or Agent)                 |
| 🗹 Yes 🗌 No                               | י ם       | res 🗹 No     | Yes                               | 🗹 No                | RUH1                    |                    |                           |
| Applicant Initials                       | Applicar  | nt Initials  | Applicant Init                    | ials                |                         | PRINT NAME:        |                           |
|  |           |              |                                   |                     |                         | DATE:              |                           |
|  |           |              |                                   |                     |                         |                    |                           |

Form Version 04.00.00



Dane County

**Department of Planning and Development Zoning Division** Room 116, City-County Building

210 Martin Luther King Jr. Blvd. Madison, Wisconsin 53703 (608) 266-4266

| Applica                | tion Fees   |
|------------------------|-------------|
| General:               | \$395       |
| Farmland Preservation: | \$495       |
| Commercial:            | \$545       |
| PERMIT FEES DOUBLE FOR | VIOLATIONS. |

 ADDITIONAL FEES MAY APPLY. CONTACT DANE COUNTY ZONING AT 608-266-4266 FOR MORE INFORMATION.

## **REZONE APPLICATION**

|                             | APPLICANT I | NFORMATION                  |  |
|-----------------------------|-------------|-----------------------------|--|
| Property Owner Name:        |             | Agent Name:                 |  |
| Address (Number & Street):  |             | Address (Number & Street):  |  |
| Address (City, State, Zip): |             | Address (City, State, Zip): |  |
| Email Address:              |             | Email Address:              |  |
| Phone#:                     |             | Phone#:                     |  |
|                             |             |                             |  |

## **PROPERTY INFORMATION**

| Township: | Parcel Number(s):             |  |
|-----------|-------------------------------|--|
| Section:  | Property Address or Location: |  |
| -         |                               |  |
|           |                               |  |

## **REZONE DESCRIPTION**

Reason for the request. In the space below, please provide a brief but detailed explanation of the rezoning request. Include both current and proposed land uses, number of parcels or lots to be created, and any other relevant information. For more significant development proposals, attach additional pages as needed.

Is this application being submitted to correct a violation? Yes No

| Existing Zoning<br>District(s) | Proposed Zoning<br>District(s) | Acres |
|--------------------------------|--------------------------------|-------|
|                                |                                |       |
|                                |                                |       |
|                                |                                |       |

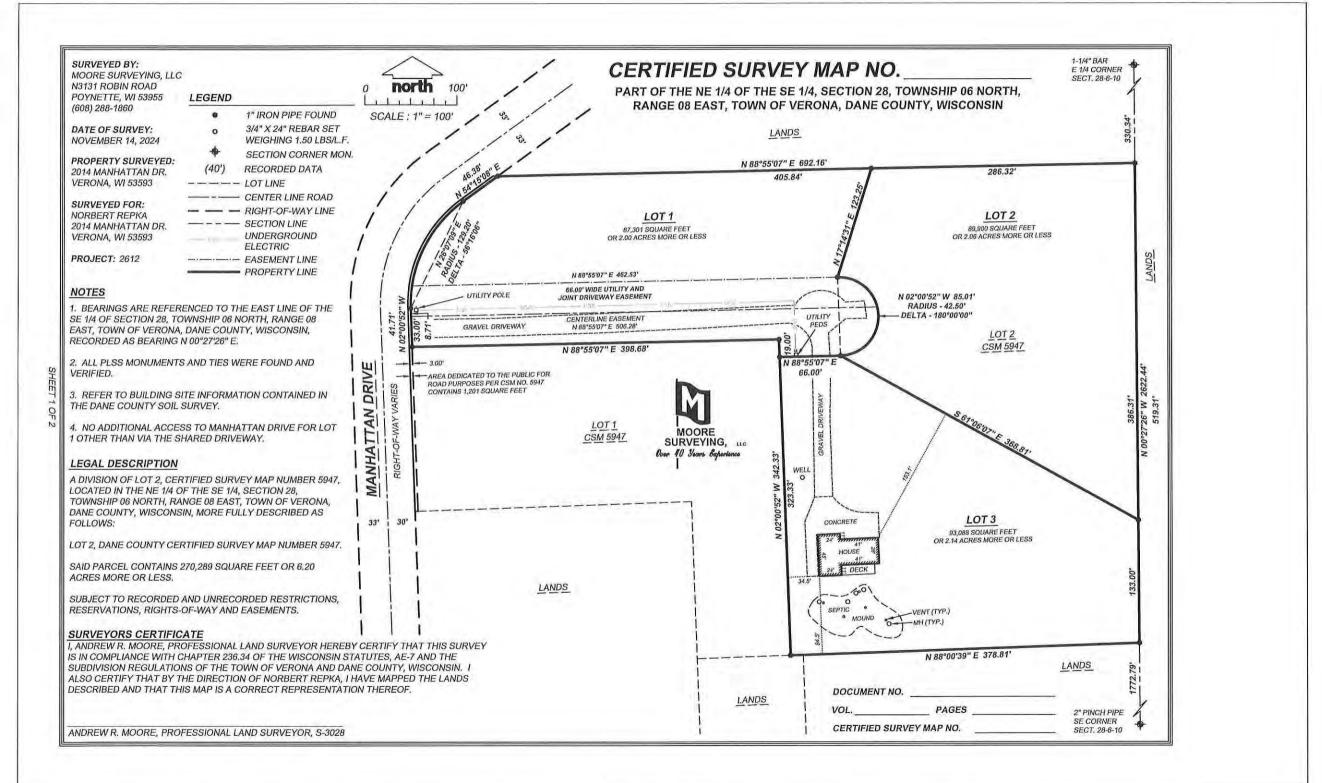
Applications will not be accepted until the applicant has contacted the town and consulted with department staff to determine that all necessary information has been provided. Only complete applications will be accepted. All information from the checklist below must be included. Note that additional application submittal requirements apply for commercial development proposals, or as may be required by the Zoning Administrator.

I certify by my signature that all information provided with this application is true and correct to the best of my knowledge and understand that submittal of false or incorrect information may be grounds for denial. Permission is hereby granted for Department staff to access the property if necessary to collect information as part of the review of this application. Any agent signing below verifies that he/she has the consent of the owner to file the application.

Owner/Agent Signature\_\_\_\_\_

Date \_\_\_\_\_





| CERTIFIED SURVE  | Y MAP NO.  |
|--|--|
| PART OF THE NE 1/4 OF THE SE 1/4, SECTION  | ON 28, TOWNSHIP 06 NORTH, RANGE 08 EAST<br>ANE COUNTY, WISCONSIN                                 |
| TOWN OF VERONA CERTIFICATE   |  |
| THIS CERTIFIED SURVEY MAP IS HEREBY ACKNOWLEDGED, ACCEPTED A   | ND APPROVED FOR RECORDING BY THE TOWN OF   |
| VERONA, DANE COUNTY, WISCONSIN   |  |
| ON THIS DAY OF , 20, 20  |  |
| ,  |  |
| TERESA WITHEE, TOWN CLERK<br>TOWN OF VERONA  | DATE   |
| REGISTER OF DEEDS CERTIFICATE  |  |
| RECEIVED FOR RECORDING THIS DAY OF   | , 20 AT  |
| AND RECORDED IN VOLUME OF CERTIFIED SURVEY   |  |
|  |  |
| KRISTI CHLEBOWSKI, DANE COUNTY REGISTER OF DEEDS D   | ATE  |
| DANE COUNTY CERTIFICATE  |  |
| APPROVED FOR RECORDING PER DANE COUNTY ZONING AND LAND REG   | ULATION COMMITTEE ACTION OF  |
| . BY   | , AUTHORIZED REPRESENTATIVE.   |
|  |  |
|  | LSO CERTIFY THAT THIS CERTIFIED SURVEY MAP IS<br>BE SUBMITTED TO THE DANE COUNTY ZONING AND      |
| AND MAPPED AS REPRESENTED ON THIS CERTIFIED SURVEY MAP. WE A<br>REQUIRED BY SEC. 75.17(1)(a), DANE COUNTY CODE OF ORDINANCES, TO<br>LAND REGULATION COMMITTEE FOR APPROVAL. IT ALSO CERTIFIES THA<br>SUBMITTED TO THE TOWN OF VERONA FOR APPROVAL.<br>SIGNED THIS DAY OF, 20   | BE SUBMITTED TO THE DANE COUNTY ZONING AND   |
| REQUIRED BY SEC. 75.17(1)(a), DANE COUNTY CODE OF ORDINANCES, TO<br>AND REGULATION COMMITTEE FOR APPROVAL. IT ALSO CERTIFIES THA<br>SUBMITTED TO THE TOWN OF VERONA FOR APPROVAL.<br>SIGNED THIS DAY OF, 20  | BE SUBMITTED TO THE DANE COUNTY ZONING AND   |
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## RR-4 to SFR-2

Lot 2, Certified Survey Map Number 5947, as recorded in Volume 28 of Certified Survey Maps, Pages 162-164, as Document Number 2162995, Dane County Register of Deeds, Located in the SE 1/4 Section 28, Township 06 North, Range 08 East, Town of Verona, Dane County, Wisconsin.