

Received

SEP 27 2001

Town of Oshkosh
Winnebago, WI

Town of Oshkosh
Conditional Use Permit Application

Check or Money Order payable to Town of Oshkosh Fee: \$450.00 receipt # 535471 / ID Number 61405
(Please print using black ink for duplication purposes)

A.

1.) PROPERTY OWNER:

Name: Patricia A Sorenson
Mailing Address: 3241 Brooks Rd Oshkosh WI 54904
Phone: 920-858-3384 Cell: _____ Email: pat.sorenson@jgmail.com

Permission is hereby granted for appropriate Town Staff to enter upon the property for the placement and removal of hearing notice sign, and conducting inspections prior to hearing. Said permission is to remain in force until the conclusion of the Public Hearing and is binding upon all heirs and assigns.

Signature: Patricia A Sorenson Date: 9-27-2001

2.) APPLICANT INFORMATION (If different than owner):

Name: JAA-
Mailing Address: _____
Phone: _____ Cell: _____ Email: _____

B. PROPERTY INFORMATION:

- 1.) Tax Key/Parcel # 018028802
- 2.) Lot _____ Block _____ Subdivision _____ or CSM# _____
Section NW 1/4 Town T. 19N North _____ Range _____ East Acres 4.41
- 3.) Location of Property: 3241 Brooks Rd Oshkosh WI 54904
- 4.) Zoning (Existing): A-2 Zoning Proposed: SAME
- 5.) Use (Existing): NA
Use (Proposed): NA
- 6.) Existing Sewer: Septic Mound Holding Tank Municipal or Needed _____
- 7.) Proposed site plan included: NA

C. EXPLANATION:

1.) CONDITIONAL USE REQUESTED:

Current property zoning is A-2 but does not meet the current requirement of having minimum of 5 acres for having animals

2.) DESCRIBE THE PROPOSED USE:

To be able to use the A2 zoning to have animals

3.) DESCRIBE THE HARDSHIP(S) THAT WOULD RESULT IF THE CONDITIONAL USE PERMIT IS NOT GRANTED:

When my husband Wayne was alive he had horses but no horses on the property since his death. I need to sell to downsize majority of proposed horses are interested in animals.

4.) DESCRIBE HOW THE PROPOSED USE WILL NOT HAVE ADVERSE EFFECTS OF SURROUNDING PROPERTY:

Surrounded by other agricultural property.

A Public Hearing will be set upon the receipt of this application and payment, whereas the applicant will furnish necessary information to the Town Zoning Administrator for processing of this application.

I ACCEPT THESE TERMS AND HEREBY SUBMIT THE APPLICATION FOR APPROVAL:

SIGNED: Patricia A. Sorenson DATE: 9-27-2021

Print name: PATRICIA A. SORENSON

Date Application Received by Zoning Administrator: Sept 27 2021

Zoning Administrator signature: Coral J. Kaufmann

C-100 Conditional Use

Property Owner: Patricia SORENSON
Applicant Name: same
Concerning property address: 3241 Brooks Rd

PUBLIC HEARING

Date of Hearing: October 21, 2021
Published Dates of public hearing (class 2 notice): Oct. 7 + 14, 2021

BOARD OF APPEALS DECISION

Date of Board of Appeals meeting(s): _____

Board of Appeals Secretary: _____ Date: _____

Board of Appeals Chair: _____ Date: _____

Decision Date: _____

Approved _____ Denied _____

State reason(s) for findings. Including details of any stipulations or conditions:



1275.57'

026050104

BROOKS RD

225.7'

389.85'

32.41

NT

32.73' 200.0'

01802880201

018028902

402.25'

589.85'

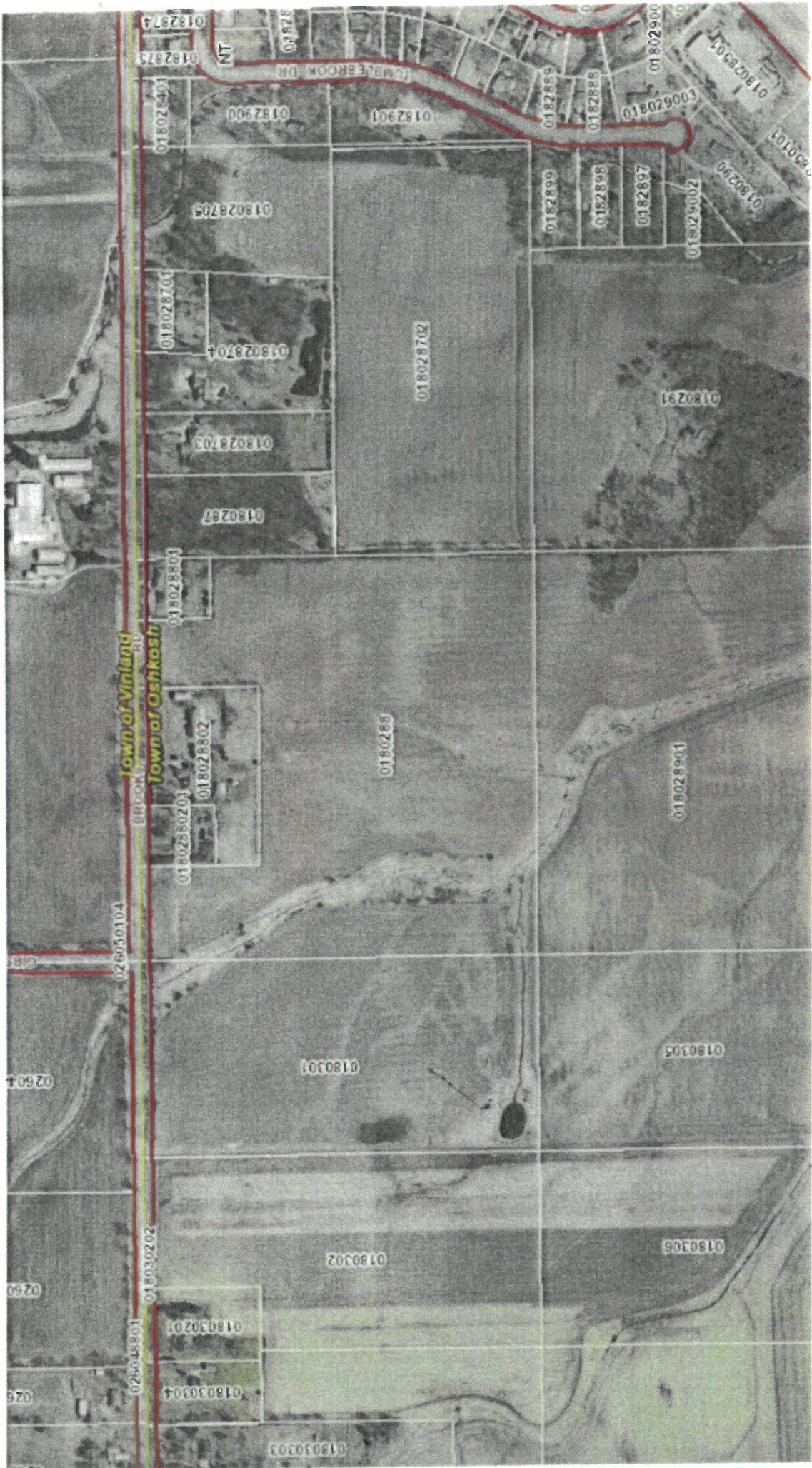
35.0'

224.0'

224.0'

200.0'

145.25'



Town of Vinland
Town of Oshkosh

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