TOWN OF PLYMOUTH ADDRESS: 8219 W High St.

Orfordville, WI 53576

PHONE: 608-879-4012 FAX: 608-879-4012

EMAIL: pz@plymouthrockwi.gov WEBSITE: www.plymouthrockwi.gov

TOWN OF PLYMOUTH

ROCK COUNTY

TOWN USE ONLY	
Application Number:	. ;;
Received By – Date (MM/DD/YYYY):	
	. "

Re-zone, Conditional Use APPLICATION FORM								
**PLEASE DO NOT COMPLETE THIS APPLICATION FORM UNTIL YOU HAVE READ THE TOWN OF PLYMOUTH RE-ZONE or								
CONDITIONAL USE – APPLICATION FORM INFORMATION. PLEASE COMPLETE BOTH PAGES OF THIS FORM AND INCLUDE A MAP, CONTAINING ALL INFORMATION AS IDENTIFED ON PAGE 2 OF THIS FORM.**								
1. Ordinance Reques			Re-zone		nal use permit	141.		
•		nsistent with Town's Compreh	ensive Plan – Fu	ture Land Use N	лар: П Yes [No		
		a is in a State-certified Farmla			Yes	☐ No		
4. Re-zone/conditiona	al use from	the Town of Plymouth Ordina	nce Section:					
5. A land division will be required as a component of the re-zone/conditional use: If you answered Yes, you will need to complete the Rock County Land Division process. Please contact the Rock County Planning, Economic & Community Development Agency before completing and submitting this form. The Agency can be reached at (608) 757-5587, planning@co.rock.wi.us, or 51 S. Main St., Janesville, WI 53545. https://www.co.rock.wi.us/planning								
6. The re- zone/conditional use area is adjacent to a Rock County highway, or in the Rock County Floodplain, Shoreland Overlay, or Airport Overlay zoning district: Yes No Unsure								
If you answered Yes or Unsure and you plan to undertake any development activity (building construction/location or earth-moving activities) in the re-zone/conditional use, you will/may need to obtain a Rock County Building Site Permit. Please contact the Rock County Planning, Economic & Community Development Agency before completing and submitting this form to the Town. The Agency can be reached at (608) 757-5587, planning@co.rock.wi.us , or 51 S. Main St., Janesville, WI 53545. https://www.co.rock.wi.us/planning								
		APPLICANT	INFORMATIO	DN				
7. LANDOWNER OR A	AUTHORIZ	ED LANDOWNER REPRESENTA	ATIVE					
a. Name:					Telephone:			
Address:			City:		State:	Zip:		
b. Name:					Telephone:			
Address:			City:		State:	Zip:		
E-mail address:								
8. AGENT (SURVEYOR	R AND DEV	/ELOPER)						
a. Surveyor name:					Telephone:			
Address:			City:		State:	Zip:		
b. Developer name:					Telephone:			
Address:			City:		State:	Zip:		
E-mail address:			•					
9. Please identify the	e individua	I from 7. or 8. that will serve	as the primary c	ontact: 7a. [7b. <u></u> 8a	. 🗌 8b. 🗌		
10. Reason for re-zor	ne/conditi	onal use:						
11. Re-zone/conditional use location:		Town of Plymouth		1/4 of 1/4				
		Section		Tax parcel number(s) -				
12. Re-zone/conditio		located adjacent to (check all Local/Town road Roe			o highway			
Local/Town road Rock County highway State highway U.S. highway 13. Landowner's contiguous property area 14. Re-zone/conditional use area (Square feet or acres):								
(Square feet or acres):								
15. If you answered Re-zone to 1. , indicate current zoning: 16. If you answered Re-zone to 1. , indicate future zoning:								

TOWN OF PLYMOUTH APPLICATION FORM

APPLICANT STATEMENT AND SIGNATURE

I, as the undersigned, am a landowner applying for a rezone/conditional use in the Town of Plymouth, in unincorporated Rock County, or am serving as the primary contact for said landowner. I do hereby verify that I have reviewed the *TOWN OF PLYMOUTH REZONE/CONDITIONAL USE—APPLICATION FORM INFORMATION*, reviewed and completed this application form, and submitted all information as required per said documents, and that all information is correct, accurate, and true to the best of my knowledge and belief, with all information accessible to me. These statements are being made to induce official action on the part of the Town of Plymouth, its agents, employees, and officials.

LANDOWNER/PRIMARY CONTACT SIGNATURE:	DATE:

APPLICATION FORM REQUIREMENTS, TERMS, AND CONCEPTS

THE FOLLOWING PROVIDES INFORMATION ON ZONING CHANGE OR CONDITIONAL USE PERMIT.

APPLICATION FORM REQUIREMENTS, TERMS, AND CONCEPTS.

PLEASE CONSULT WITH THE TOWN CLERK FOR FURTHER CLARIFICATION OR INFORMATION.

THE NUMBERS BELOW CORRESPOND TO THOSE QUESTION NUMBERS FOUND IN THE APPLICATION FORM.

- **1.** A **Re-zone** allows for a change in a lot's zoning district, thereby changing the permitted and conditional land uses on the lot.
 - A **Conditional use permit (CUP)** allows for land uses on a lot subject to conditions stated in the permit and different than those normally permitted.
- 2. All local government units (Towns, Counties Cities, and Villages) in the State of Wisconsin are required to prepare and adopt Comprehensive Plans, covering all aspects of planning and development in the local government unit. All land use activities in a local government unit must be consistent with the Future Land Use Map as contained in their Comprehensive Plan.
- **3.** A **State-certified Farmland Preservation zoning district** is a zoning district certified by the State of Wisconsin for agricultural use. Landowners in this district may be eligible for a State farmland preservation tax credit and lands in this district are subject to development restrictions.
- 4. All Towns in Rock County have State-certified Farmland Preservation zoning districts, certified by the State of Wisconsin for agricultural use. Various land use activities in Base Farm Tracts within these and other zoning districts are subject to certain restrictions.

Please consult with the Town clerk to ensure the proposed change meets all Town Base Farm Tract requirements.

- **5. Land division** is the act or process of dividing an existing lot into two (2) or more lots in unincorporated Rock County, generally for the purpose of sale/ownership transfer or building construction or location.
- **6.** The **Rock County Floodplain zoning district** is a zoning district administered by Rock County and containing lands identified as floodplain by the Federal Emergency Management Agency (FEMA), as delineated per the most current FEMA floodplain maps adopted by the Rock County Board of Supervisors. Lands in this district are subject to development restrictions.

The **Rock County Shoreland Overlay zoning district** is a zoning district administered by Rock County and containing lands within one thousand (1,000) feet of the ordinary high-water mark of a navigable lake, flowage or pond, or within three hundred (300) feet of the ordinary high-water mark of a navigable river, stream, or creek. Lands in this district are subject to development restrictions.

The **Rock County Airport Overlay zoning district** is a zoning district administered by Rock County and containing lands adjacent to and in close proximity to the Southern Wisconsin Regional Airport. Lands in this district are subject to development restrictions.

Please consult with the Rock County Planning, Economic & Community Development Agency ("Agency") to determine whether a proposed zoning/land use change area is in any of these districts. The Agency can be reached at (608) 757-5587, planning@co.rock.wi.us, or 51 S. Main St., Janesville, WI 53545. https://www.co.rock.wi.us/planning

TOWN OF PLYMOUTH APPLICATION FORM

APPLICATION CHECKLIST						
	Yes	No	Comment			
1. Have you included a map clearly marked "Re-zone or Conditional Use", identifying the area and containing all of the following information?						
a. Location of the re-zone/conditional use area by section, township, and range:						
b. Approximate location and dimension of EXISTING/PROPOSED property lines, including ownership, in the re-zone/conditional use area:						
c. Approximate location and dimension of all EXISTING/PROPOSED streets, including name, in and adjacent to the re-zone/conditional use area:						
d. Approximate location and dimension of all EXISTING property lines, including ownership name and zoning designation, within one thousand (1,000) feet of the re-zone/conditional use area:						
e. Scale, north arrow, and date of creation:						
2. Has the map been prepared at a convenient scale not to exceed two hundred (200) feet to the inch, with the map pages numbered in sequence if more than one (1) page is required, and total map pages identified on each page?						
3. Have you provided all required application form information and has the required party signed the application form?						
4. Have you included 10 copies of this application form, 10 hard copies of the map, and the application fee?						

THANK YOU FOR COMPLETING THE TOWN OF PLYMOUTH RE-ZONE or CONDITIONAL USE-APPLICATION FORM.

PLEASE SEND VIA POSTAL MAIL, OR HAND-DELIVER, TEN (10) COPIES OF THIS APPLICATION FORM, TEN (10) COPIES OF THE RE-ZONE/CONDITIONAL USE MAP, AND THE APPLICATION FEE TO:

TOWN OF PLYMOUTH 8219 W High St. Orfordville, WI 53576

EMAIL: pz@plymouthrockwi.gov clerk@plymouthrockwi.gov