

Building, Site Plan & Plan of Operation Application Town of Eagle (Waukesha County), Wisconsin

Town of Eagle
820 E. Main Street
Eagle, WI 53119

Overview: The Plan Commission and Town Board reviews building plans, site plans, and plans of operation for those land uses specifically requiring such review as listed in the land-use matrix.

Governing regulations. The procedures and standards governing the review of this application are found in Article 6 of the Town's zoning code.

General instructions: Complete this application and submit one copy to the Town Clerk or to the Town Planner via email (deto@waukeshacounty.gov). Alternatively, you can submit your application online at <https://townofeagle.zoninghub.com>. An application fee is also required. An invoice number will be provided to you after the initial intake review to pay the required application fee. A Professional Reimbursement Form is required prior to the application being considered complete.

Before you formally submit your application, you may meet with the Town Planner who can answer any questions you may have. The Town Planner can also review your application before it is formally submitted to determine if it is complete and provides enough information to describe the circumstances related to this application. If you have any questions, do not hesitate to contact the Town Planner at (262) 548-7813 or via email at rleto@waukeshacounty.gov.

Application submittal deadline: The Plan Commission and Town Board meet jointly, generally the first Monday of the month, to review certain types of development applications. This application must be submitted and determined to be complete by the Town Planner, no later than 30 days prior to the date established for the Plan Commission-Town Board meeting. Please contact the Town Planner to verify the deadline for a specific month.

1. Applicant and agent information Include the names of the agent, if any, that helped prepare this application including the supplemental information. Examples include surveyors, engineers, landscape architects, architects, planners, and attorneys.

Applicant	Agent
Name	Robert Chapman
address	W34459450 Jericho Dr
zip code	Eagle WI 53119
telephone	262-844-0185
address	chapman3bpeagle@gmail.com

2. Type of application (check all that apply)

<input checked="" type="checkbox"/> Building plans	<u>Complete Parts A, B and E</u>
<input checked="" type="checkbox"/> Site plan	<u>Complete Parts A, C and E</u>
<input checked="" type="checkbox"/> Plan of operation	<u>Complete Parts A, D and E</u>
<input checked="" type="checkbox"/> New project	
<input type="checkbox"/> Amendment of prior approval (if any)	

If an amendment, the date of last approval (if any):

Part A. About the Property

3. Subject property information

Physical address 590W 35680 Hwy NN Eagle WI 53119
Tax key number(s) EGLT- 18/8999003 GLT - EGLT - EGLT -

Note: The tax key number can be found on the tax bill for the property or it may be obtained from the Town Clerk.

Is the subject property currently in violation of the Town's zoning code as determined by the Zoning Administrator?

No
 Yes

If yes, please explain.

Comment: Pursuant to Section 500.106 of the Town's zoning code, the Town may not issue a permit or other approval that would benefit a parcel of land that is in violation of the zoning code, except to correct the violation or as may be required by state law.

Are there any unpaid taxes, assessments, or other required payment that are specifically related to the subject property?

No
 Yes

If yes, please explain.

Comment: Pursuant to Section 500.107 of the Town's zoning code, the Town may not issue a permit or other approval that would benefit a parcel of land where taxes, assessments, or other required payments are delinquent and due.

4. **Zoning information.** The subject property is located in the following zoning district(s). (check all that apply)

<input type="checkbox"/> P-1 Public	<input type="checkbox"/> AP Agricultural land preservation	<input type="checkbox"/> B-2 Local business
<input type="checkbox"/> Q-1 Quarry	<input type="checkbox"/> RR Rural residential	<input checked="" type="checkbox"/> B-4 Mixed business
<input type="checkbox"/> C-1 Conservancy	<input type="checkbox"/> R-1 Residential	<input type="checkbox"/> M-1 Limited industrial
<input type="checkbox"/> UC Upland conservancy	<input type="checkbox"/> B-1 Neighborhood business	<input type="checkbox"/> M-2 General industrial

Part B. Building Plans

5. **Building type.** Which of the following best describes the building?

Townhouse Institutional Work/live Storage
 Multi-family Commercial Industrial Other

Please refer to the zoning code for any design requirements that may apply.

6. **Exterior building materials**

Roof

metal

Front elevation

metal, cultured stone, glass

Left elevation

metal

Right elevation

metal, cultured stone, glass

Rear elevation

metal

7. **Phasing.** Will the building be built in phases? If yes, describe.

NO

Part C. Site Plan

7. Site parameters (area in square feet or acres)

Subject property

Building coverage

2,750

Outdoor storage

—

Stormwater facilities

—

Impervious surfaces

3,800

Impervious surfaces include buildings, parking areas and driveways, sidewalks, decks, patios, and other types of 'hard' surfaces.

Landscaping and other undeveloped areas

—

Wetlands

—

Attach appropriate documentation if there are any wetlands.

100-year floodplain

—

8. Road access

Name	New Access	Change to Existing Access	No Change to Existing Access
<u>Godfrey Lane</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Parking (See the standards and requirements in Article 11 of the zoning code.)

Minimum number of required spaces

See Appendix B of the zoning code for parking requirements for the proposed land use(s).

Proposed number of spaces

5

ADA van accessible spaces

1

Other ADA accessible spaces

—

Number of electric charging stations (if any)

—

Number of spaces in front of the building

5

Number of spaces on the side(s) of the building

0

Number of spaces to the rear of the building

0

10. Phasing. Will the site be developed in phases? If yes, describe.

NO

Part E. Other

12. Supplemental materials. Attach the following to this application form.

1. A project map with the information listed in Appendix A of the zoning code.
2. Proposed construction plans (if applicable)

13. Attachments. List any attachments included with your application.

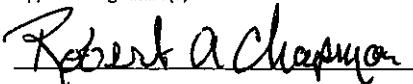
14. Other information. You may provide any other information you feel is relevant to the review of your application.

15. Applicant certification

- I certify that all of the information in this application, along with any attachments, are true and correct to the best of my knowledge and belief.
- I understand that I may be charged additional fees (above and beyond the initial application fee) consistent with the Town's chargeback policy. The signed chargeback form is attached.
- I understand that submission of this application authorizes town officials, Plan Commission members, Town Board members, employees, and other designated agents to enter the property to conduct whatever site investigations are necessary to review this application. This does not authorize any such individual to enter any building on the subject property, unless such inspection is specifically related to the review of this application and the property owner gives his or her permission to do so.
- I understand that this application and any written materials relating to this application will become a permanent public record and that by submitting this application I acknowledge that I have no right to confidentiality. Any person has the right to obtain copies of such written materials or view it online.
- I understand that the Town Planner will review this application to determine if it contains all of the required information. If he or she determines that the application is incomplete, it will not be scheduled for review until it is deemed to be complete.

Applicant Signature(s):

Date:

 Sept. 16.25

Part D. Plan of Operation

Northwoods Taxidermy

11. Operating conditions

Describe the business operation.

Describe any vehicles associated with the use, including the number, size, and type (e.g., work vehicles, fleet vehicles, delivery vehicles).

Describe the hours of operation. Is there any seasonal variation?

How many full-time and part-time employees will there be? Is there any seasonal variation?

How many employees will there be onsite at peak hours?

Will the proposed business operation create any noise outside of the building?

Will the proposed business operation create any emissions (e.g., fumes, smoke, steam, vapor, dust,) to the atmosphere?

Will the proposed business operation create any vibrations outside of the building?

Will the proposed business operation involve any explosives or other flammable materials?

Will the proposed business operation involve any radioactive materials?

Will the proposed business operation create special needs for wastewater disposal?

Will the proposed business operation require unusually high levels of potable water?

Will any materials or equipment be kept out of doors, if otherwise allowed?

Will any activities be conducted out of doors, if otherwise allowed?

What kind of federal, state, county or town licensees, if any, are needed to operate the proposed business?

One super duty pickup truck, plus Box trailer.

6am - 4pm, No

approx 4, No

approx 5, No

No

No

No

No

No

No

No

No

Taxidermy license from state, and federal.