ROCK COUNTY PLANNING, ECONOMIC & COMMUNITY DEVELOPMENT AGENCY
51 SOUTH MAIN STREET
JANESVILLE, WI 53545

TELEPHONE: (608) 757-5587
EMAIL: PLANNING@CO.ROCK.WI.US
WEB: WWW.CO.ROCK.WI.US

AGENCY USE ONLY

Application Number: _____

Received By – Date (MM/DD/YYYY): _____

PRELIMINARY LAND DIVISION APPLICATION FORM

PROPOSED LAND DIVISION CLASSIFICATION:

☐ **Major Land Division** Subdivision Plat Required
☐ **Minor Land Division** CSM for lots 35 acres or less; Plat of Survey for lots greater than 35 acres
☑ **Transfer to Adjoining Owner** Plat of Survey or CSM
☐ **Lot Combination** CSM Required

1. Applicant has contacted Town, Rock County Planning, Economic & Community Development Agency, and City(s)/Village (if land division is within Extra-Territorial Plat Approval Jurisdiction (ETJ) area) officials and these parties have determined land division is feasible: ☑ **Yes** ☐ **No**

2. Land division is consistent with Town's Comprehensive Plan – Future Land Use Map: ☑ **Yes** ☐ **No**

3. Land division area is located in a Farmland Preservation zoning district certified by the State of Wisconsin: ☐ **Yes** ☑ **No**
If you answered **Yes**, proceed to **4.** If you answered **No**, proceed to **5.**

4. Land division meets Town Base Farm Tract and any other applicable Farmland Preservation zoning district requirement: ☐ **Not Applicable** ☐ **Yes** ☑ **No**

5. Land division will require a zoning change: ☑ **Yes** ☐ **No**

APPLICANT INFORMATION

6. LANDOWNER OR AUTHORIZED LANDOWNER REPRESENTATIVE

a. Name:	COATS INCOME TRUST-ETA (TIM HALL)			Telephone:	608-449-7105		
Address:	2214 E. COUNTY ROAD M	City:	MILTON	State:	WI	Zip:	53563
b. Name:				Telephone:			
Address:		City:		State:		Zip:	

7. AGENT (SURVEYOR AND DEVELOPER)

a. Surveyor name:	COMBS AND ASSOCIATES, INC			Telephone:	752-0575		
Address:	109 W. MILWAUKEE ST	City:	JANESVILLE	State:	WI	Zip:	53548
b. Developer name:				Telephone:			
Address:		City:		State:		Zip:	

8. Identify the individual from **6.** or **7.** that will serve as the primary contact: ☐ **6a.** ☐ **6b.** ☑ **7a.** ☐ **7b.**

PROPERTY INFORMATION

9.Reason for application: ☑ **Sale/ownership transfer** ☐ **Farm consolidation** ☐ **Create Conforming Lot** ☐ **Adjust Lot Line**

Include an explanation of the proposal along with any other considerations not included on the application form.

10. Land division area location: **Town of** MILTON — SE **1/4 of** NE **1/4**; **Section** 30 — **Tax parcel number(s) -** 026 030001

11. Land division area is located within the Extra-Territorial Plat Approval Jurisdiction (ETJ) Area of a City(s)/Village: ☑ **Yes** ☐ **No** If **Yes**, identify: **City(s)/Village of** MILTON

12. Land division area is located adjacent to (check all that apply): ☑ **Local/Town road** ☐ **County highway** ☐ **State highway** ☐ **U.S. highway**

13. Landowner's contiguous property area (Square feet or acres): 132.28 ACRES	**14.** Land division area (Square feet or acres): 32.31 ACRES	**15.** Current zoning of land division area: A-1
16. Number of new/additional lots created by land division: 4	**17.** Future zoning of new/additional lot(s) created by land division: A-3	**18.** Future zoning of parent lot: A-1

19. Covenants or restrictions will be placed on the land division area: ☐ **Yes** ☑ **No**
If **Yes**, identify covenants or restrictions:

20. A residential building is currently located in the land division area: ☐ **Yes** ☑ **No**
If **Yes**, the building utilizes a: ☐ **Private onsite wastewater treatment system** ☐ **Public sanitary sewer system**

21. Public improvement construction proposal/plan will be submitted by (mm/dd/yyyy): NONE

22. Public improvement construction will begin on (mm/dd/yyyy):

APPLICANT STATEMENT AND SIGNATURE

I, as the undersigned, am a landowner applying for a land division in unincorporated Rock County, or am serving as the primary contact for said landowner. I do hereby verify that I have 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.

LANDOWNER/PRIMARY CONTACT SIGNATURE: B M Coats **DATE:** 8-11-20

APPLICATION CHECKLIST

	Yes	No	Comment
1. Have you included a map clearly marked "*PRELIMINARY PLAT OF SURVEY, CERTIFIED SURVEY MAP OR SUBDIVISION PLAT*", identifying the land division area and containing all of the following information?	☑	☐	
a. Location of the land division area by section, township, and range:	☑	☐	
b. Approximate location and dimension of all **EXISTING** streets and property lines, including name and ownership (if applicable), in and adjacent to the land division area:	☑	☐	
c. **EXISTING/PROPOSED** County, Town, and City/Village (if applicable) zoning designations of all **EXISTING/PROPOSED** lot(s) and outlot(s), in and adjacent to the land division area:	☑	☐	
d. Approximate location and dimension of all **PROPOSED** lot(s), outlot(s) and blocks(s), numbered for reference, in the land division area:	☑	☐	
e. Indication of all **PROPOSED** lot(s) and outlot(s) use if other than single-family residential, in the land division area:	☑	☐	
f. Distance from all **PROPOSED** lot(s) and outlot(s) point of beginning to section corner or quarter corner, in the land division area:	☑	☐	
g. Approximate location, dimension (if applicable), and name (if applicable) of all of the following, whether **EXISTING** or **PROPOSED**, in the land division area:	☐	☐	
(1) Buildings:	☑	☐	
(2) Streets, alleys, and public ways:	☑	☐	
(3) Driveways:	☑	☐	
(4) Rail lines:	☐	☑	NONE
(5) Private water wells or water supply systems:	☑	☐	
(6) Private onsite wastewater treatment systems or public sanitary sewer systems:	☑	☐	
(7) Any other public utilities:	☑	☐	
(8) Easements (Utility, drainageway, pedestrian way, etc.):	☐	☑	NONE PROPOSED
(9) Vegetative land cover type:	☑	☐	SEE AIR PHOTO
(10) Environmentally sensitive areas (Floodplain, steep slope, etc.):	☐	☑	NONE
(11) Productive agricultural soils, cultural resources, and woodlands:	☐	☑	NONE
(12) Surface water features:	☐	☑	NONE
(13) Drainageways:	☐	☑	NONE
(14) Detention or retention areas:	☐	☑	NONE
(15) Cemeteries:	☐	☑	NONE
(16) Bridges/culverts:	☐	☑	NONE
(17) Rock outcroppings:	☐	☑	NONE
h. Approximate location, dimension, name (if applicable), and purpose of all dedicated public parks or outdoor recreation lands, or any other public or private reservation, including any conditions, in the land division area:	☐	☑	NONE
i. Preliminary concept for connection with existing public sanitary sewer and water supply system or an alternative means of providing water supply and treatment and disposal of sewage, in the land division area:	☐	☑	NONE
j. Preliminary concept for collecting and discharging stormwater, in the land division area:	☐	☑	NONE
k. Scale, north arrow, and date of creation:	☑	☐	
l. Any other information required by the Agency:	☐	☑	NOTHING REQUESTED
2. Has the map been prepared at a 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. Has the map been prepared by a land surveyor licensed in Wisconsin?	☑	☐	
4. Have you provided all required application form information and has the required party signed this application form?	☑	☐	
5. Have you included a hard copy of this application form and the map, an electronic copy of the map in a format compatible with the Agency's Geographic Information System (GIS), and the application fee?	☑	☐	

PLEASE SEND VIA POSTAL MAIL, OR HAND-DELIVER, THIS FORM,
A HARD COPY AND ELECTRONIC COPY OF THE PRELIMINARY MAP, AND THE APPLICATION FEE TO:

ROCK COUNTY PLANNING, ECONOMIC & COMMUNITY DEVELOPMENT AGENCY
51 N. MAIN ST.
JANESVILLE, WI 53545

TOWN OF MILTON
23 FIRST STREET
MILTON, WI 53563

TELEPHONE: (608) 868-2465
FAX: (608) 868-6642
EMAIL: TOWNOFMILTON@CHARTER.NET
WEB: WWW.TOWNOFMILTONRC.COM

TOWN OF MILTON

ROCK COUNTY

TOWN USE ONLY

Application Number: _____

Received By – Date (MM/DD/YYYY): _____

ZONING/LAND USE CHANGE – APPLICATION FORM

****PLEASE DO NOT COMPLETE THIS APPLICATION FORM UNTIL YOU HAVE READ THE *TOWN OF MILTON ZONING/ LAND USE CHANGE – 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. Zoning/land use change type (please check only one): ☑ **Re-zone** ☐ **Conditional use permit** ☐ **Variance**

2. Zoning/land use change is consistent with Town's Comprehensive Plan – Future Land Use Map: ☑ **Yes** ☐ **No**

3. Zoning/land use change area is in a State-certified Farmland Preservation zoning district: ☐ **Yes** ☑ **No**

4. Zoning/land use change meets all Town Base Farm Tract requirements: ☐ **Yes** ☐ **No**

5. A land division will be required as a component of the zoning/land use change: ☑ **Yes** ☐ **No**
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.

6. The zoning/land use change 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 zoning/land use change area, 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.

APPLICANT INFORMATION

7. LANDOWNER OR AUTHORIZED LANDOWNER REPRESENTATIVE

a. Name:	Coats Income Trust - ETAL (Tim Hall)			Telephone:		(608) 449-7105	
Address:	2214 E County Road M	City:	Milton	State:	WI	Zip:	53563
b. Name:				Telephone:			
Address:		City:		State:		Zip:	

8. AGENT (SURVEYOR AND DEVELOPER)

a. Surveyor name:	Combs & Associates, Inc.			Telephone:		(608) 752-0575	
Address:	109 W. Milwaukee Street	City:	Janesville	State:	WI	Zip:	53548
b. Developer name:				Telephone:			
Address:		City:		State:		Zip:	

9. Please identify the individual from **7.** or **8.** that will serve as the primary contact: **7a.** ☐ **7b.** ☐ **8a.** ☑ **8b.** ☐

ZONING/LAND USE CHANGE INFORMATION

10. Reason for zoning/land use change: ☑ **Sale/ownership transfer** ☐ **Farm consolidation** ☐ **Refinance** ☐ **Other:**

11. Zoning/land use change area location:

Town of	Milton	SE **1/4 of**	NE **1/4**
Section	30	**Tax parcel number(s) -**	026 030001

12. Zoning/land use change area is located adjacent to (check all that apply):
☑ **Local/Town road** ☐ **Rock County highway** ☐ **State highway** ☐ **U.S. highway**

13. Landowner's contiguous property area (Square feet or acres): 132.28

14. Zoning/land use change area (Square feet or acres): 32.31

15. If you answered **Re-zone** to **1.**, indicate current zoning of zoning/land use change area: A-1

16. If you answered **Re-zone** to **1.**, indicate future zoning of zoning/land use change area: A-3

17. Landowners within one thousand (1,000) feet of zoning/land use change area (Use additional page (1a) if necessary):

a. Name:				Telephone:			
Address:		City:		State:		Zip:	
b. Name:				Telephone:			
Address:		City:		State:		Zip:	
c. Name:				Telephone:			
Address:		City:		State:		Zip:	

APPLICANT STATEMENT AND SIGNATURE

I, as the undersigned, am a landowner applying for a zoning/land use change in the Town of Milton, 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 MILTON ZONING/LAND USE CHANGE – 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 Milton, its agents, employees, and officials.

LANDOWNER/PRIMARY CONTACT SIGNATURE: _____ **DATE:** _____

APPLICATION CHECKLIST

	Yes	No	Comment
1. Have you included a map clearly marked *"ZONING/LAND USE CHANGE"*, identifying the zoning/land use change area and containing all of the following information?	☑	☐	
a. Location of the zoning/land use change area by section, township, and range:	☑	☐	
b. Approximate location and dimension of **EXISTING/PROPOSED** property lines, including ownership, in the zoning/land use change area:	☑	☐	
c. Approximate location and dimension of all **EXISTING/PROPOSED** streets, including name, in and adjacent to the zoning/land use change 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 zoning/land use change 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 a hard copy of this application form, a hard copy of the map, and the application fee?	☑	☐	

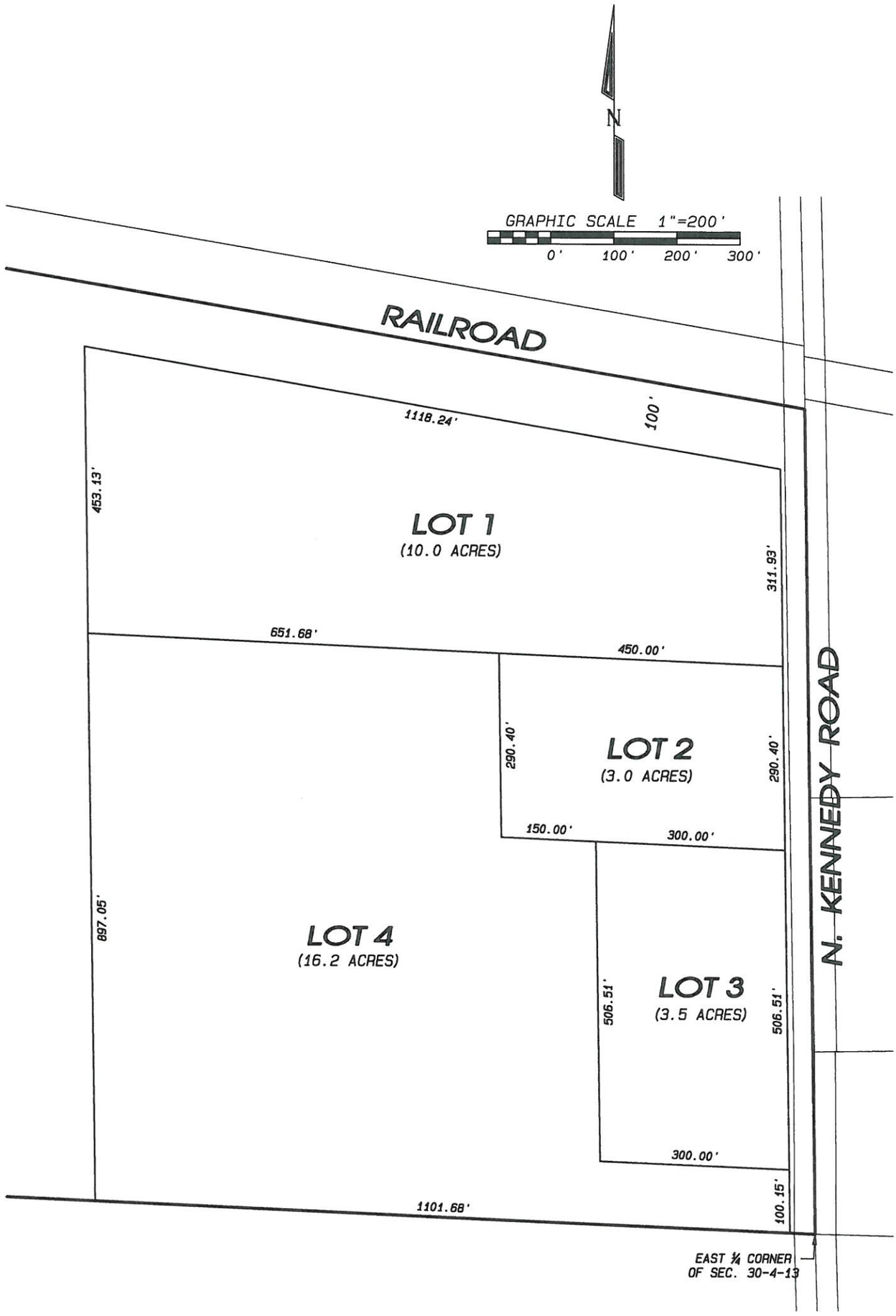
THANK YOU FOR COMPLETING THE *TOWN OF MILTON ZONING/LAND USE CHANGE – APPLICATION FORM*.

PLEASE SEND VIA POSTAL MAIL, OR HAND-DELIVER, A COPY OF THIS APPLICATION FORM, A COPY OF THE ZONING/LAND USE CHANGE MAP, AND THE APPLICATION FEE TO:

TOWN OF MILTON
23 FIRST STREET
MILTON, WI 53563

PRELIMINARY CERTIFIED SURVEY MAP

PART OF THE SE. ¼ OF THE NE. /188 OF SECTION 30, T.4N., R.13E., OF THE 4TH P.M., MILTON TOWNSHIP, ROCK COUNTY, WISCONSIN.



DATE: 8/10/20

NOTE: THIS MAP IS SUBJECT TO ANY AND ALL EASEMENTS AND AGREEMENTS, RECORDED AND UNRECORDED.

THE BASIS OF BEARINGS IS ASSUMED.

Project No. 120 - 413 **For: HALL**

Combs & ASSOCIATES
• LAND SURVEYING
• LAND PLANNING
• CIVIL ENGINEERING

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Janesville, WI 53548
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