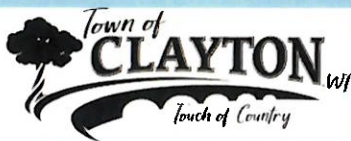


SITE PLAN APPLICATION

Town of Clayton Town Hall

8348 Hickory Ave
Larsen, WI 54947
Phone: 920-836-2007
Email: administrator@claytonwinnebago.gov
Website: https://www.townofclayton.net/



Office Use Only

Date: _____ / _____ /20____
Paid: \$ _____
☐ Check ☐ Cash ☐ Credit/Debit Card
By: _____
Please make checks payable to:
TOWN OF CLAYTON
Receipt #: _____

SUBMITTAL FEES & REQUIREMENTS

Site Plans:	- Meets the requirements of the Town's Zoning Code (Pages 94-97 & 224-225) - Meets the requirements of the Town's Subdivision Ordinance (can be found on the Town's website) - Submit 1 Hard Copy with application and email an 11 x 17 copy
Fees:	See Town Fee Schedule
Plan of Operation:	Letter describing the business

PROPERTY INFORMATION

Parcel ID / Tax Key No.: 006-0621	Current Zoning I-2 (Heavy Industrial)
Site Address / Location: 2843 County Road II	
Current Land Use: Heavy Industrial (Freight)	Proposed Land Use: Heavy Industrial (Freight)
Lot Size/Total Acreage: 27.94 ACRES	Project Schedule: TBD

APPLICANT

Name **Stan Richards**
Street Address **600 Gillam Road**
City **Wilmington** State **OH** Zip Code **45177**
Phone **(800) 543-5589**
E-mail **construction.permits@rlcarriers.com**

PROPERTY OWNER (IF NOT THE SAME)

Name **Greenwood Motor Lines, Inc dba R&L Carriers**
Street Address **600 Gillam Road**
City **Wilmington** State **OH** Zip Code **45177**
Phone **(800) 543-5589**
E-mail **construction.permits@rlcarriers.com**

BUILDER

Name _____
Street Address _____
City _____ State _____ Zip Code _____
Phone _____
E-mail _____

ENGINEER

Name **Joe Iovinelli**
Street Address **333 East Butterfield, Rd., Suite 600**
City **Lombard** State **IL** Zip Code **60148**
Phone **(630)-925-1110**
E-mail **jiovinelli@atwell.com**

SURVEYOR

Name **James D. Baker**
Street Address **One Overlook Point Ste 290**
City **Lincolnshire** State **IL** Zip Code **60069**
Phone **(847)-325-7282**
E-mail **JBaker@atwell.com**

Newspaper Publication Dates: _____ & _____

Posting Date: _____

300ft Neighborhood Notice Completed On: _____

Re-Zoning is: ☐ Approved ☐ Denied

Comments: _____

APPLICANT ACKNOWLEDGEMENT & SIGNATURE

By the execution of this application, applicant hereby authorizes the Town of Clayton or its agents to enter upon the property during the hours of 7:00 AM to 7:00 PM daily for the purpose of inspection. Applicant grants the Town of Clayton or its agents even if applicant has posted this land against trespassing pursuant to Sec. 943.13 Wis. Stats.

Signature

6/5/2026

Today's Date