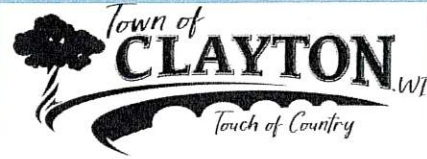


Conditional Use Application

Town of Clayton Town Hall
8348 Hickory Ave
Larsen, WI 54947
Phone: 920-836-2007
Email: clerk@claytonwinnebago.wi.gov
Website: https://www.townofclayton.net/



Property Owner(s)

Name Paul E Sidbeck

Street Address 4521 Grandview Rd

City Larsen State WI Zip Code 54947

Phone (920) 886-5722

E-mail toonine81@gmail.com

Applicant:

Check: Architect: Engineer: Surveyor: Attorney: Agent: Owner:

Name: Kendra L Truckey

Address: 4521 Grandview Rd Larsen WI Zip Code: 54947

Phone: 920 381-1862 E-Mail: Kendratsidbeck@gmail.com

Describe the reason for the Conditional Use: Egg laying; personal use

Conditional Use Specifies:

Number of Lots: 1 Total Acreage: .75 Tax Key #: 006-0944

Legal Description: Primary Residence, small hobby garden Current Zoning: R1
(10 by 15)

I certify that the attached drawings are to the best of my knowledge complete and drawn in accordance with all Town of Clayton codes.

Applicant Signature: Kendra Truckey Date: 6/9/25

For Town Use Only

Fee (see Town Fee Schedule)

Fee: \$350.00 Check #: CASH Receipt: 3363 Date: 6/9/25

Received By: Carolee G.

Review Meetings - Plan Comm _____ Town Board _____

Newspaper Publication Dates: _____ & _____ Posting Date: _____

300ft Neighborhood Notice Distribution : _____

Conditional Use is: Approved Denied

Comments: _____

Notes: 1. Please notify utility companies regarding your proposed development. 2. A Conditional Use approval does not constitute approval of a building permit or any required approval of a highway connection permit. 3. A Conditional Use Application & Fee must be submitted 30 working days prior to meeting.



6'x10'