

**CITY OF SHEBOYGAN****APPLICATION FOR
CONDITIONAL USE**

Fee: \$250.00

Review Date: July 8&9 2024

Zoning: 5 District

Read all instructions before completing. If additional space is needed, attach additional pages.

SECTION 1: Applicant/ Permittee Information

| | | | |
|---|---|--|-------------------|
| Applicant Name (Ind., Org. or Entity) Camp Evergreen | Authorized Representative Mark Ellis | Title Executive Director | |
| Mailing Address 2776 N. 31st Pl. | City Sheboygan | State WI | ZIP Code 53083 |
| Email Address campevergreen1926@gmail.com | | Phone Number (incl. area code) 920-452-4221 | |

SECTION 2: Landowner Information (complete these fields when project site owner is different than applicant)

| | | | |
|---------------------------------------|----------------|--------------------------------|----------|
| Applicant Name (Ind., Org. or Entity) | Contact Person | Title | |
| Mailing Address | City | State | ZIP Code |
| Email Address | | Phone Number (incl. area code) | |

SECTION 3: Project or Site Location

| | |
|--|---|
| Project Address/Description 2776 N. 31st Place, Sheboygan, WI 53083 | Parcel No. 59281630792 & 59281628964 |
|--|---|

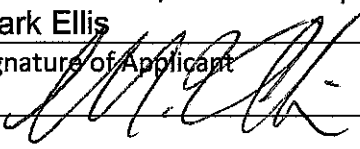
SECTION 4: Proposed Conditional Use

| | |
|-------------------------------------|---|
| Name of Proposed/Existing Business: | Camp Evergreen |
| Existing Zoning: | Suburban Residential - 5 District |
| Present Use of Parcel: | Community recreation center for adults & children with cognitive & physical disabilities |
| Proposed Use of Parcel: | Community recreation center for adults & children with cognitive & physical disabilities |
| Present Use of Adjacent Properties: | Adjacent properties to West, East, and South are residential suburban properties, adjacent property to North is a park property owned by City of Sheboygan Evergreen & Jaycee Parks |

SECTION 5: Certification and Permission

Certification: I hereby certify that I am the owner or authorized representative of the owner of the property which is the subject of this Permit Application. I certify that the information contained in this form and attachments is true and accurate. I certify that the project will be in compliance with all permit conditions. I understand that failure to comply with any or all of the provisions of the permit may result in permit revocation and a fine and/or forfeiture under the provisions of applicable laws.

Permission: I hereby give the City permission to enter and inspect the property at reasonable times, to evaluate this notice and application, and to determine compliance with any resulting permit coverage.

| | | |
|---|-----------------------------|------------------------------|
| Name of Owner/Authorized Representative (please print) Mark Ellis | Title Executive Director | Phone Number 920-452-4221 |
| Signature of Applicant  | | Date Signed 6-20-2024 |

Complete application is to be filed with the Department of City Development, 828 Center Avenue, Suite 208. To be placed on the agenda of the City Plan Commission, application must be filed three weeks prior to date of meeting – check with City Development on application submittal deadline date. Applications will not be processed if all required attachments and filing fee of \$250 (payable to the City of Sheboygan) are not submitted along with a complete and legible application. Application filing fee is non-refundable.