CONDITIONAL USE PERMIT City of Two Rivers

Document Number

Permit No. 8-1-2024

Before the City Council of the City of Two Rivers, Manitowoc County, Wisconsin, regarding the premises at <u>3310 – 45th Street</u> in the City of Two Rivers, Manitowoc County, State of Wisconsin, further described as:

S 1/2 NW 1/4 S26 T20N R24E TRACT 1 OF CSM V 14 P 99

This permit replaces the previously approved permit no. 2021-04

Inspections Department City of Two Rivers PO Box 87 Two Rivers, WI 54241-0087

Parcel ID Number: 053-226-203-001.07

Zoning Classification of the Premises is: B-2 Business District/Conditional Use to operate a commercial kennel. Mailing Address of the Premises Operator: 7522 Sunset Drive, Two Rivers, WI 54241

WHEREAS, the Zoning Code and Zoning District Map of the above named municipality, pursuant to State Statute, state that the premises may not be used for the purpose hereinafter described but that upon petition such use may be approved by the municipality as a Conditional Use in particular circumstances as defined by the standards in the Zoning Ordinance; and

Petition therefore having been made, and public hearing held thereon, and the City Council of the City of Two Rivers having determined that by reason of the nature, character and circumstances of the proposed use, and of the specific and contemporary conditions, permit of such use upon the terms and conditions hereinafter prescribed would be consistent with the requirements of the Zoning Ordinance.

Now, therefore, it is permitted, subject to compliance with the terms and conditions hereinafter stated, that the Premises may be used for the purpose of the operation of a commercial kennel.

Permitted by action of the City Council of the City of Two Rivers on September 3, 2024. Original filed in the office of the City Clerk of the City of Two Rivers, Wisconsin

The Conditions of this Permit are:

- 1. This Permit shall become effective upon the execution and recording by the Owner of the Premises as acceptance hereof.
- 2. This Permit is subject to the conditions herein and is subject to amendment and termination in accordance with the provisions of the Zoning Code of this Municipality.
- 3. The operation of the use permitted shall be in strict conformity to the approved conditions identified with this Petition for this Permit and such plans are incorporated herein by reference as if set forth in detail herein.
- 4. Any substantial change to the use or site as the conditions permitted by the issuance of this Permit would require approval by the Plan Commission and City Council as an amendment to this Permit.
- 5. This Permit is specifically issued to Lucky Paws Real Estate LLC and shall lapse upon a change in ownership of the business, tenancy of the subject premises or if the land use ceases operation for more than 12 months. This permit may be reissued only after a proper application is made to the City as if this permit were being newly issued.
- 6. Conditions of Operations:
 - a. Hours of operation:
 - ${\bf 1.} \ \ {\bf Boarding:} \ \ {\bf 24} \ hours \ per \ day, \ {\bf Sunday Saturday,} \ not \ to \ exceed \ {\bf 25} \ dogs \ at \ any \ given \ time$
 - 2. Daycare: 8AM 6PM, Monday Saturday, not to exceed 25 dogs at any given time
 - 3. Grooming salon and retail: 8AM -6PM, Monday Saturday
 - 4. Outdoor operations: 7AM 8PM, Sunday Saturday, dogs in the outdoor run shall be supervised at all times
 - b. The yard shall be maintained in a clean and odor free condition
 - c. Signage in accord with the City's Sign Code.
 - d. Inspection by the TRFD prior to opening for business
 - e. All landscaping plantings shall be maintained and kept in good health or be replaced; and, all landscaped areas shall be maintained in such a manner to be free of weeds
 - f. The City reserves the right to require privacy fencing based on future development in the area or on a complaint basis
 - g. Fencing shall be maintained in good condition

SIGNATURES OF PROPERTY OWNER(S) AND PERMITEE(S):

Adam Taylor, Zoning Administrator

As Owner(s) of the Subject Property, I/we accept and understand the above-described conditions.

| Printed Name: | | Printed Name: | |
|--|-----|--|---------------------------|
| STATE OF WISCONSIN MANITOWOC COUNTY | | | |
| Personally came before me this person(s) who executed the foregoing inst | | , 2024, the above named vledge the same. | and to be the |
| Amanda Baryenbruch Notary Public, Manitowoc County, Wiscon My commission expires: | sin | | |
| SIGNATURES - CITY OF TWO RIVERS | | | |
| Greg Buckley, City Manager | | Amanda Baryenbruch, City Clerk | |
| STATE OF WISCONSIN MANITOWOC COUNTY Personally, came before me this day executed the foregoing instrument and ac | | above-named Greg Buckley and Amanda Baryenbruch know e. | n to be the person(s) who |
| Printed Name: | | | |
| Notary Public, Manitowoc County, Wiscon My commission expires: | sin | | |
| THIS INSTRUMENT WAS DRAFTED BY: | | | |