

Print**Application for Land Division - Submission #888****Date Submitted: 4/23/2024****City of Whitewater**

Application for Land Division
312 W Whitewater Street
P.O. Box 178
Whitewater WI 53190
(262) 473-0540

Applicant and subject property information

In order for applications to be processed all information, drawings, application signatures and fees required shall be submitted at the time of application (please complete all items - attach additional pages as necessary, put N/A if not applicable).

Notice

The Plan Commission meetings are scheduled at 6:00 p.m. on the 2nd Monday of the month. All complete application materials must be submitted to the City by 4:00 p.m. four weeks prior to the meeting.

Please check the appropriate box below for the type of application being submitted:

- | | | | |
|------------------------------------|------------------------------------|--|---|
| <input type="radio"/> Annexation | <input type="radio"/> Amended plat | <input type="radio"/> Preliminary plat | <input checked="" type="radio"/> Certified Survey |
| <input type="radio"/> Concept plan | <input type="radio"/> Zoning | <input type="radio"/> Re-plat | |

Vacating

- ☐ Plat
☐ Easement
☐ Building line

Final plat, which also must include:

- ☐ Storm water management plan
☐ Developer's agreement

Jurisdiction

- ☒ City limits
☐ Extra-territorial jurisdiction

Total acres*

1.1

County*

Walworth

Current zoning*

R-3

Proposed zoning*

R-3

Tax parcel number(s) and acreage

/CAH 00007

Location of property (including legal description):*

1207 W. Carriage. LOT 7 CARRIAGE HILL SUBD. CITY OF WHITEWATER
See CSM for proposed legal description.

Applicant's signature

I hereby Certify that the information supplied with this application is true and correct, and that the paper and electronic copies of the materials submitted are consistent with each other, to the best of my knowledge. In addition I have been given the Authority to sign on behalf of the other all parties involved in this Land Division Application.

Applicant's role*

- ☒ Owner
☐ Developer
☐ Other

If applicant's role is "Other," please explain:

Signature*

Matt Kuehl

Phone Number*

262-473-7300

Fax Number*

000-000-0000

Email Address*

matt@keystoneres.net

Date

4/23/24

Property Owner Information

Please complete information-attach additional pages as necessary-put N/A if not applicable.

First Name

Matt

Last Name

Kuehl

Address

PO Box 1166

City

Lake Geneva

State

WI

Zip Code

53147

Phone Number

262-473-7300

Fax Number**Email Address**

matt@keystoneres.net

If ownership is other than sole or community property, please name the partners, principals, beneficiaries, etc. respectively:

Name**Position****Address****Name****Position**

Address**Name****Position****Address****Owner's agent/attorney (main contact person responsible for application)****Role***

- ☐ Attorney
☐ Realtor
☒ Other

If "Other," please specify.**Name*****Email Address*****Address*****City****State****Zip Code****Phone Number*****Fax Number*****Developer**

Name**Email Address****Address****City****State****Zip Code****Phone Number****Fax Number**

Developer's engineer

Name**Email Address****Address****City****State****Zip Code****Phone Number****Fax Number**

Property description - complete either A or B.

A. Recorded subdivision information

Subdivision

See attached CSM

Lot

Block

Acres

County of record

Document number

Volume number (if applicable)

Page number (if applicable)

B. Property Description Information: (attach a metes and bounds description with a sketch, signed and sealed by a Registered Professional Land Surveyor)

Property address

Survey name

Acres

Abstract number

Deed(s) which conveyed the property to the present owner:

Document number

Acres

Volume number

Page number

Metes and bounds description

CSM Carriage Street.pdf

Cost recovery certificate & agreement

The city may retain the services of professional consultants (including planners, engineers, architects, attorneys, environmental specialists, and recreation specialists) to assist in the city's review of an application for development review coming before the Plan and Architectural Review Commission, Board of Zoning Appeals, and/or Common Council. In fact, most applications require some level of review by the city's planning consultant. City of Whitewater staff shall retain sole discretion in determining when and to what extent it is necessary to involve a professional consultant in the review of an application. The submittal of an application or petition for development review by an applicant shall be construed as an agreement to pay for such professional review services associated with the application or petition. The city may apply the charges for these services to the applicant and/or property owner in accordance with this agreement. The city may delay acceptance of an application or petition (considering it incomplete), or may delay final action or approval of the associated proposal, until the applicant pays such fees or the specified percentage thereof. Development review fees that are assigned to the applicant, but that are not actually paid, may then be imposed by the city as a special charge on the affected property.

Signature of applicant/petitioner*

Matt Kuehl

Signature of property owner (if different)

Printed name of applicant/petitioner*

Matt Kuehl

Printed name of property owner (if different)

Date of signature*

4/23/24

Date of signature