

TOWN OF OREGON  
1138 Union Road • Oregon, WI 53575 • (608) 835-3200  
PERMIT APPLICATION

1. NAMES — Owner

Applicant (if other than Owner)

Name Patricia E. Anderson Living Trust Name County of Dane  
Street 875 Union Rd. Street 5201 Fen Oak Drive  
City, State, Zip Oregon, WI 53575 City, State, Zip Madison WI 53718  
Phone: Days 835-3727 Cell \_\_\_\_\_ Phone: Days 224-3765 Cell \_\_\_\_\_

2. PROPERTY LOCATION

Section: 13 Property size: \_\_\_\_\_ Property zoning: A-3 Parcel No.: 050913390800  
Property Address: 875 Union Rd. and 4998 Locust Grove Rd.

3. PROJECT DESCRIPTION - Please attach CSM, sketch or diagram.

Land Division \_\_\_\_\_ Has a Dane County Density Study been completed? Yes / No  
Total Acres Owned \_\_\_\_\_  
Size of parcels to be created:  
Parcel 1) 0.9 acres; Parcel 2) 7.9 acres; Parcel 3) 17.2 acres; Parcel 4) \_\_\_\_\_ acres  
Principal reason for land division (describe): Separation of existing residence

Zoning Change \_\_\_\_\_  
Zoning change from A-3 District to R-1 District for 7.9 acres  
Reason for change \_\_\_\_\_

Conditional Use Permit \_\_\_\_\_  
Conditional Use Permit for \_\_\_\_\_

Mobile Home \_\_\_\_\_  
Mobile home is \_\_\_\_\_ feet by \_\_\_\_\_ feet. Length of time estimated on site: \_\_\_\_\_  
Intended purpose: \_\_\_\_\_

Driveway Construction \_\_\_\_\_  
Location: \_\_\_\_\_  
Driveaway \_\_\_\_\_ Ag. Field road \_\_\_\_\_ Proposed road length: \_\_\_\_\_ feet  
Maximum slope before construction: \_\_\_\_\_ % Maximum slope after construction: \_\_\_\_\_ %  
Conditions: Width of driveway \_\_\_\_\_ feet. Center of driveway from property line: \_\_\_\_\_ feet  
Drainage Culvert Needed? No \_\_\_\_\_ Yes \_\_\_\_\_ Size: Length \_\_\_\_\_ feet Diameter \_\_\_\_\_ inches  
Distance from neighbor's driveway: \_\_\_\_\_ feet  
 Site Plan \_\_\_\_\_ per attached \_\_\_\_\_  
 Other Please describe: \_\_\_\_\_

4. PLANNING REQUIREMENTS

The Town of Oregon may require the following information: Parcel legal description, Property Boundaries, Woodlands, Location on official zoning map, Utility and other easement locations, Flood plain & wetlands, streams, rivers, ponds, drainage, Slopes over 12% highlighted, Surrounding land use (within 200'), Livestock confinement areas, Topography, float, rolling, steep; Prime farmland designation, Existing Land Use Plan designation, Mature woodlands, Existing structures, Soil Types, Proposed Use — number of dwelling units, type of industry, etc., Street, roads and driveways (existing and planned)

5. SIGNATURE

Patricia E. Anderson 9-30-13 hmm 9/30/13  
Owner (signature is mandatory) Date Applicant (if other than Owner) Date

# Dane County Rezone & Conditional Use Permit

Application Date	Petition Number
08/08/2013	DCPREZ-2013-10577
Public Hearing Date	C.U.P. Number
08/27/2013	

OWNER INFORMATION		AGENT INFORMATION	
OWNER NAME ANDERSON LIVING TR, PATRICIA E	PHONE (with Area Code) (608) 835-3727	AGENT NAME BILL WHITE	PHONE (with Area Code) (608) 283-2246
BILLING ADDRESS (Number & Street) 875 UNION RD		ADDRESS (Number & Street) 1 SOUTH PINCKNEY SUITE 700	
(City, State, Zip) OREGON, WI 53575		(City, State, Zip) Madison, WI 53703	
E-MAIL ADDRESS		E-MAIL ADDRESS wwhite@michaelbest.com	

ADDRESS/LOCATION 1	ADDRESS/LOCATION 2	ADDRESS/LOCATION 3
ADDRESS OR LOCATION OF REZONE/CUP 4998 Locust Grove Rd	ADDRESS OR LOCATION OF REZONE/CUP	ADDRESS OR LOCATION OF REZONE/CUP 875 Union Rd
TOWNSHIP OREGON	SECTION 13	TOWNSHIP OREGON
SECTION 13	TOWNSHIP	SECTION 13
PARCEL NUMBERS INVOLVED 0509-133-9080-0	PARCEL NUMBERS INVOLVED	PARCEL NUMBERS INVOLVED 0509-133-8760-0

REASON FOR REZONE			CUP DESCRIPTION		
SEPARATION OF EXISTING RESIDENCE					
FROM DISTRICT:	TO DISTRICT:	ACRES	DANE COUNTY CODE OF ORDINANCE SECTION	ACRES	
A-3 Agriculture District	R-1 Residence District	0.9			
A-3 Agriculture District	RH-2 Rural Homes District	7.9			
A-3 Agriculture District	RE-1 Recreational District	17.2			

C.S.M REQUIRED?	PLAT REQUIRED?	DEED RESTRICTION REQUIRED?		INSPECTOR'S INITIALS	SIGNATURE:(Owner or Agent)
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	SSA1	
Applicant Initials _____	Applicant Initials _____	Applicant Initials _____	Applicant Initials _____	PRINT NAME:	

*Revised*

DATE:
PRINT NAME:

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1138 Union Road • Oregon, WI 53575 • (608) 835-3200  
PERMIT APPLICATION

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Applicant (if other than Owner)

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City, State, Zip Oregon, WI 53575 City, State, Zip Madison, WI 53718  
Phone: Days 835-3727 Cell \_\_\_\_\_ Phone: Days 224-3765 Cell \_\_\_\_\_

2. PROPERTY LOCATION

Section: \_\_\_\_\_ Property size: \_\_\_\_\_ Property zoning: \_\_\_\_\_ Parcel No.: \_\_\_\_\_  
Property Address: \_\_\_\_\_

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Land Division

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Zoning Change

Zoning change from A-3 District to RH-2 District for 7.9 acres  
Reason for change \_\_\_\_\_

Conditional Use Permit

Conditional Use Permit for \_\_\_\_\_

Mobile Home

Mobile home is \_\_\_\_\_ feet by \_\_\_\_\_ feet; Length of time estimated on site: \_\_\_\_\_  
Intended purpose: \_\_\_\_\_

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Location: \_\_\_\_\_  
Driveway \_\_\_\_\_ Ag. Field road \_\_\_\_\_ Proposed road length: \_\_\_\_\_ feet  
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Distance from neighbor's driveway: \_\_\_\_\_ feet

Site Plan \_\_\_\_\_ per attached

Other Please describe: \_\_\_\_\_

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5. SIGNATURE

Owner (signature is mandatory) Patricia E. Anderson 9-30-13 Date 9/30/13  
Applicant (if other than Owner) Leann Mlyn Date \_\_\_\_\_

# Dane County Rezone & Conditional Use Permit

Application Date	Petition Number
06/20/2013	DCPREZ-2013-10580
Public Hearing Date	C.U.P. Number
08/27/2013	

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OWNER NAME ANDERSON LIVING TR, PATRICIA E	PHONE (With Area Code) (608) 835-3727	AGENT NAME BILL WHITE	PHONE (With Area Code) (608) 283-2246
BILLING ADDRESS (Number & Street) 875 UNION RD	(City, State, Zip) OREGON, WI 53575	ADDRESS (Number & Street) 1 SOUTH PINCKNEY SUITE 700	(City, State, Zip) Madison, WI 53703
E-MAIL ADDRESS		E-MAIL ADDRESS wvwhite@michaelbest.com	

ADDRESS/LOCATION 1	ADDRESS/LOCATION 2	ADDRESS/LOCATION 3
ADDRESS OR LOCATION OF REZONE/CUP	ADDRESS OR LOCATION OF REZONE/CUP	ADDRESS OR LOCATION OF REZONE/CUP
TOWNSHIP OREGON	SECTION 24	TOWNSHIP
TOWNSHIP	TOWNSHIP	TOWNSHIP
PARCEL NUMBERS INVOLVED 0509-242-8570-0	PARCEL NUMBERS INVOLVED	PARCEL NUMBERS INVOLVED

## REASON FOR REZONE

SEPARATION OF EXISTING RESIDENCE

## CUP DESCRIPTION

FROM DISTRICT:	TO DISTRICT:	ACRES	DANE COUNTY CODE OF ORDINANCE SECTION	ACRES
A-3 Agriculture District	RH-2 Rural Homes District	7.9		

  

C.S.M REQUIRED?	PLAT REQUIRED?	DEED RESTRICTION REQUIRED?	INSPECTOR'S INITIALS	SIGNATURE:(Owner or Agent)
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	SSA1	

Applicant Initials \_\_\_\_\_

Applicant Initials \_\_\_\_\_

Applicant Initials \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

DATE: \_\_\_\_\_