## Village of Black Earth CONDITIONAL USE/SPECIAL EXCEPTION APPLICATION

\$250 residential/ \$350 Commercial nonrefundable fee (payable to the Village of Black Earth)

| Owner/Agent  | Contractor(s)        |  |
|--|----------------------|--|
| Name LTA Rentals LLC   | NA                   |  |
| Address SS85 Mahocker Ad.  | , Mazonaria we 53560 |  |
| Phone 608-517-9788   |                      |  |
| Address of Property 1801 1803 East St., Black Early WII  Tax Parcel number(s) 0806-351-2078-2  53515                                   |                      |  |
| Tax Parcel number(s) 0806-351-2078-2   |                      |  |
| Current Zoning District  |                      |  |
| If this is a resubmission, provide previous date. Or N/A   |                      |  |
| Current use, structures, and other improvements:   |                      |  |
| Conditional use/Special Exception requested (ordinance section # & specific use):  NEZONE +D +D Single +anily N-2  PES, dental NOVSES. |                      |  |
|  |                      |  |
|  |                      |  |

| Fully explain the intended use and any planned improvements, signage, and an phased or future planned use. Include operational days/hours, anticipated daily traffic parking plan, rubbish and recycling plan, etc. If work will be completed in phases describe. |
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| No infravenents have been made to property.   |
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| Include any other factors pertinent to the proposed use, site conditions, or surrounding area that may be important for the Commission to consider when reviewing your request. |  |  |
|---|--|--|
| This would be a zero-lot line   |  |  |
| This world be a zero-lot line<br>residence  |  |  |
|   |  |  |
| Provide detailed information in your request. Attach a plat map, other maps of your site, construction plans, and/or additional supplemental information as applicable.         |  |  |
| I certify that the information I have provided in the application is true and accurate. I understand and agree to apply for all building permits as required.                   |  |  |
| Signed: Date:   |  |  |
| Name: 1944 L. Adles   |  |  |
| Remit application to:  Clerk/Treasurer  Village of Black Earth  1210 Mills St., PO Box 347  Black Earth, WI 53515   |  |  |
| For Office Use Only   |  |  |
| Date received by Clerk: 103 2024 Check Number:  Date presented to the governing body: Plan Com 10 10 2014   |  |  |
| Approval/Denial date:   |  |  |