

Application Packet For Variance Request

Town of Delton
Sauk County, WI
PO Box 148, Lake Delton, WI 53940

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Town Clerk: Deborah Kowalke
clerk@townofdeltonwi.gov
Phone: (608) 253-4621

The purpose of this document is to provide guidance in applying for a variance in the Town of Delton. The documents contained in this packet will help guide individuals or organizations as they plan and prepare submittal documents, providing for increased efficiency and a streamlined approval process.

Summary of Application Process and Checklist

1. Contact the Town Clerk to obtain a Variance Request Application packet in electronic form - clerk@townofdeltonwi.gov
2. Fill out all forms in the packet completely. You are encouraged to contact the Town Engineer/Zoning Administrator at this time, to obtain guidance and procedural information for the request.
3. Prepare a drawing of your site, **TO A RECOGNIZED SCALE**, showing the existing structures, if any. This drawing may be required to be completed by a surveyor or engineer, at the Town's discretion. Also include the following in the drawing:
 - ☐ Any septic systems (tanks, drain field, etc.) and wells.
 - ☐ All roads or streets and water frontage, if applicable.
 - ☐ Property lines, proximity of adjoining property owner's structure(s), and land uses extending 500 feet from property or subject location. Note Sauk County Online Mapping is available for use.
 - ☐ Provide names and addresses of landowners within 500 feet of the area to be considered.
4. Submit the following items, **assembled in packet form**, to the Town Clerk (Deborah Kowalke). The mailing address is provided at the top of the page. Forms can also be emailed to the Town Clerk (*the Town Clerk will forward the info forward the information on to the proper Town Representatives for review*).

EACH PACKET SHALL CONTAIN THE FOLLOWING:

- ☐ Completed Reimbursable Services Agreement
- ☐ Completed Application For Variance Form
- ☐ Vicinity Map
 - o Show the property location in relation to major and minor roads and relevant facilities within a 2 mile radius of the proposed site.
- ☐ Site plan prepared in step 3 of this document.
- ☐ Signed Statement of Understanding
- ☐ \$500 Application Fee

The Applicant shall submit all documentation to the Town Engineer/Zoning Administrator. If the submittal packet is found to be complete, your request will be scheduled for a Board of Appeals Hearing.

5. The Town Engineer/Zoning Administrator (and other Town representatives as appropriate) shall review all of the submitted documents and determine the completeness of the application. The Town Engineer will work with you to make sure that you have all of the appropriate information for your submittal.

6. Once the Town Engineer/Zoning Administrator has indicated that you have all of the appropriate information, **you will need to provide the completed packet to the Town Clerk** for distribution to Town Officials.
7. Once the submittal is complete and has been preliminarily reviewed by the parties mentioned above in step 6, a **Public Hearing** will be held so that neighbors and other concerned citizens have an opportunity to voice their opinions, and as required by Statute. Please plan to attend this public hearing.

ASSOCIATED FEES

Application Fee: \$500, submitted at the time of application.

Review Fees: The applicant shall pay a fee equal to the Town's actual cost incurred as a result of the review by any Town Representative. The fee shall be paid within 30 days of the bill being issued by the Town.

Agreement for Reimbursable Services

In the Review of Variance Requests
Town of Delton, Sauk County, WI

The cost of application review for all variance requests shall be borne by the Applicant. The Applicant shall pay all reasonable Town of Delton incurred expenses relating to a particular variance request. This may include meeting charges, professional consultants, or other relevant Town expenses incurred in connection to the variance request. The Town reserves the right to apply the charges for these services as well as for staff time, mileage, and Town equipment usage expended in the administration, investigation and processing of applications to the Applicant.

The Applicant is required to provide the Town with an executed copy of this agreement as a prerequisite to the processing of the variance request application. The submittal of a variance request application shall be construed as an agreement to pay for such professional review services applicable to the proposal. Review fees which are applied to an Applicant, but which are not paid within 30 days of the issuance of a bill by the Town will accrue interest at a rate of 1.5% per month until the fee is paid in full.

_____ for
Applicant and/or Property Owner(s)

_____, agrees to reimburse the Town of Delton for
(Project Name)

all review costs associated with, but not limited to, the Town Engineer/Zoning Administrator and Town Attorney, in connection with the variance request and, further, agrees to reimburse the Town for other administrative staff review if, in the judgment of the Town Board, such reimbursement is warranted.

Dated this _____ day of _____, 20_____.

Signature of Applicant

Printed Name

Signature of Property Owner
(If Different From Applicant)

Printed Name

Application for Variance

GENERAL INFORMATION			
Property Owner(s):			
Mailing Address:	City:	State:	Zip Code:
Email Address:	Phone Number (Days):	Phone Number (Cell):	
Application Completed By: (If Different than Owner)		Company:	
Mailing Address:	City:	State:	Zip Code:
Email Address:	Phone Number (Days):	Phone Number (Cell):	

DESCRIPTION OF PROPERTY				
Lot #:	Block:	Subdivision:	Tax Parcel #:	Total Acreage:
Address of Subject Property:		City:	State:	Zip Code:
Present Improvements on Property:				
Sewage System:	Flood Plain Status:		Existing Zoning:	
Intended Structure Use:			Size of Building:	
Distance To: Center Line of Road _____ Back Lot Line _____			Estimated Starting Date:	
Distance To: Side Lot Line _____ Other Side Lot Line _____			Estimated Completion Date:	
Type of Construction: <input type="checkbox"/> New Building <input type="checkbox"/> Addition <input type="checkbox"/> Alterations <input type="checkbox"/> Moving				

Describe the variance(s) requested, and indicate how the variance will meet 4.07(1), (2), & (3) of the Town's Zoning Ordinance. Attach Add'l Sheets.

Signature of Person Preparing this Form

Printed Name

Date

Signature of Owner (If Different)

Printed Name

Date

Statement of Understanding

By signing below, I, _____, certify that the information contained in this
(Print Applicant Name)
application is true and accurate to the best of my knowledge, and understand that a deliberate misrepresentation of information may be grounds for denial or reversal of this application, and/or revocation of any approval already awarded based on this application.

I also authorize Town of Delton staff & consultants permission to view and enter the subject property for the purpose of reviewing and investigating this request.

I understand that submittal of this application and payment of the proper fees does not mean that issuance of a variance is imminent or guaranteed.

I understand that issuance of this variance does not qualify as, nor replace the necessity for proper permitting for the proposed project.

Dated this _____ day of _____, 20____.

Signature of Applicant

Printed Name

Signature of Property Owner
(If Different From Applicant)

Printed Name