

## CONDITIONAL USE PERMITS

Contact Planner Mark Lyons for conditional use questions and information needed.

Planner – Mark Lyons

Office hours – First Mondays 9AM to 3PM, Second & Third Wednesdays 9AM to 3PM, and Fourth Mondays 1PM to 4:30PM

Contact information – 262-968-3656

- Chargeback reimbursement form ([click here for application](#))
- Complete Conditional Use Application ([click here for application](#))
- Application information includes -
  - Complete information of Responsible Party
  - Complete information of property owner
  - Tax Key number
  - Legal description
  - Zoning designation
  - Town Lane Use Plan designation
  - Request for
  - Section of the ordinance cited
  - Description of proposed use
- Applicable fees per schedule ([click here for schedule](#))

**Applications must be received by the first Monday of the month of the Plan Commission Meeting**

**TOWN OF GENESEE**  
S43 W31391 Highway 83  
P.O. Box 242  
Genesee Depot, WI 53127  
Tel: (262) 968-3656 Fax: (262) 968-3809

**TOWN OF GENESEE PROFESSIONAL SERVICES REIMBURSEMENT NOTICE**

**PLEASE READ AND SIGN THE FOLLOWING NOTICE:**

Pursuant to the Town of Genesee Ordinance, the Town of Genesee Town Board has made a determination that whenever the services of the Town Planner, Town Engineer, Town Attorney, Town Building Inspector or any other of the Town's professional staff results in a charge to the Town for that professional's time and services, and such service is not a service supplied to the Town as a whole, the Town Clerk shall charge that service for the fees incurred by the Town to the property owner incurring those fees even if the request is not approved. Also, pursuant to the Town of Genesee Ordinance, certain other fees, costs, and charges are the responsibility of the property owner even if the request is not approved.

I/we, the undersigned, have been advised that, pursuant to the Town of Genesee, if the Town Planner, Town Engineer, Town Attorney, Town Building Inspector or any other Town professional provides services to the Town because of my/our activities, whether at my/our request or at the request of the Town, I/we shall be responsible for the fees incurred by the Town even if my/our request is not approved. In addition, I/we have been advised that pursuant to the Town of Genesee, certain other fees, costs, and charges are my/our responsibility even if my/our request is not approved.

You will receive your first bill once charges are incurred or your issue is closed. Bills will be sent monthly thereafter so you are kept up to date regarding your current charges.

**PLEASE PRINT LEGIBLY**

**PROJECT NAME:** \_\_\_\_\_

**PROJECT ADDRESS:** \_\_\_\_\_

**TAX KEY NO:** \_\_\_\_\_

**REQUEST FOR:** \_\_\_\_\_

**RESPONSIBLE PARTY (PETITIONER) NAME, MAILING ADDRESS, SIGNATURE & DATE**

Printed Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

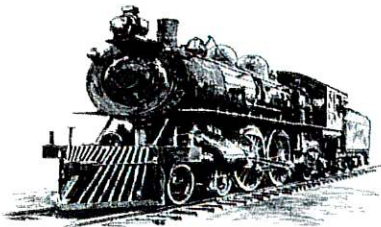
Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

**PROPERTY OWNER NAME, MAILING ADDRESS, SIGNATURE & DATE:**

Printed Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_



*Town of Genesee* est. 1843  
S43 W31391 Highway 83  
P.O. Box 242  
Genesee Depot, WI 53127  
Tel: (262) 968-3656 Fax: (262) 968-3809

**CONDITIONAL USE APPLICATION**

**RESPONSIBLE PARTY NAME, MAILING ADDRESS & DATE:**

\_\_\_\_\_  
*Printed Name* *Date*

\_\_\_\_\_  
*Mailing Address* *City* *State* *Zip*

\_\_\_\_\_  
*Phone* *Fax* *Email*

**PROPERTY OWNER NAME, MAILING ADDRESS & DATE:**

\_\_\_\_\_  
*Printed Name* *Date*

\_\_\_\_\_  
*Mailing Address* *City* *State* *Zip*

\_\_\_\_\_  
*Phone* *Fax* *Email*

**C/U FILE NO.:** \_\_\_\_\_ **TAX KEY NO.:** \_\_\_\_\_

**LEGAL DESCRIPTION:** \_\_\_\_\_  
\_\_\_\_\_

**ZONING DESIGNATION:** \_\_\_\_\_

**TOWN LAND USE PLAN DESIGNATION:** \_\_\_\_\_

**REQUEST FOR:** \_\_\_\_\_

**SECTION OF ORDINANCE:** \_\_\_\_\_

**\*ON A SEPARATE PAPER PLEASE INCLUDE A WRITTEN SUMMARY OF THE  
PROPOSED USE/USES**

**\*ALONG WITH A BRIEF BUSINESS PLAN (IF APPLICABLE)**

**PLEASE SUBMIT THE FOLLOWING ADDITIONAL INFORMATION WITH THIS APPLICATION AS REQUIRED PER SECTION 40 (A) (1) OF THE TOWN OF GENESEE ZONING CODE:**

1. Two (2) paper copies and one (1) electronic copy (thumb drive) of a map, preferably a topographic map, drawn to a scale of not less than two hundred (200) feet to one (1) inch, showing: the land in question; its legal description and location; location and use of all existing buildings, sanitary systems and private water supplies on such land; the high water elevation of any navigable waters within one hundred (100) feet of the boundaries of the land in question; the 100-year floodplain, and any wetlands or environmental corridors on the property or land in question.
2. Names and complete mailing addresses, including zip codes, or the owners of all properties within three hundred (300) feet of any part of the land included in the proposed application unless waived in writing by the Town Plan Commission **(to be provided by the Town of Genesee)**.
3. Additional information as may be required by the Town Planner, Town Engineer, Town Building Inspector or the Town Plan Commission.
4. Where necessary, to comply with certain regulations established by applicable laws, applications shall be required to be submitted to the other governmental bodies having jurisdiction which may include the State Department of Natural Resources, the U.S. Army Corps of Engineers and/or Waukesha County.

**Name of Responsible Party:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Name of Property Owner or Authorized Agent:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Title or authority, if not the property owner:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**BOTH THE OWNER/AUTHORIZED AGENT AND OPERATOR MUST SIGN THIS APPLICATION.**