

TOWN OF Bradford
 4414 S Odling Rd
 Darien, WI 53114
 608-713-2631
 townbradfordclerk@gmail.com
 https://www.townofbradfordwi.com

TOWN OF Bradford

ROCK COUNTY

TOWN USE ONLY	
Application Number:	_____
Received By – Date (MM/DD/YYYY):	_____

Re-zone, Conditional Use APPLICATION FORM

****PLEASE DO NOT COMPLETE THIS APPLICATION FORM UNTIL YOU HAVE READ THE TOWN OF BRADFORD RE-ZONE or CONDITIONAL USE – APPLICATION FORM INFORMATION. PLEASE COMPLETE BOTH PAGES OF THIS FORM AND INCLUDE A MAP, CONTAINING ALL INFORMATION AS IDENTIFIED ON PAGE 2 OF THIS FORM.****

1. Ordinance Request (please check only one):	<input type="checkbox"/> Re-zone	<input type="checkbox"/> Conditional use permit
2. Re-zone/conditional use consistent with Town’s Comprehensive Plan – Future Land Use Map:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Re-zone/conditional use area is in a State-certified Farmland Preservation zoning district:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Re-zone/conditional use from the Town of _____ Ordinance Section:		
5. A land division will be required as a component of the re-zone/conditional use:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you answered Yes , you will need to complete the Rock County Land Division process. Please contact the Rock County Planning, Economic & Community Development Agency before completing and submitting this form. The Agency can be reached at (608) 757-5587, planning@co.rock.wi.us , or 51 S. Main St., Janesville, WI 53545. https://www.co.rock.wi.us/planning		
6. The re- zone/conditional use area is adjacent to a Rock County highway, or in the Rock County Floodplain, Shoreland Overlay, or Airport Overlay zoning district: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure		
If you answered Yes or Unsure and you plan to undertake any development activity (building construction/location or earth-moving activities) in the re-zone/conditional use, you will/may need to obtain a Rock County Building Site Permit. Please contact the Rock County Planning, Economic & Community Development Agency before completing and submitting this form to the Town. The Agency can be reached at (608) 757-5587, planning@co.rock.wi.us , or 51 S. Main St., Janesville, WI 53545. https://www.co.rock.wi.us/planning		

APPLICANT INFORMATION

7. LANDOWNER OR AUTHORIZED LANDOWNER REPRESENTATIVE					
a. Name:		Telephone:			
Address:	City:	State:	Zip:		
b. Name:		Telephone:			
Address:	City:	State:	Zip:		
E-mail address:					
8. AGENT (SURVEYOR AND DEVELOPER)					
a. Surveyor name:		Telephone:			
Address:	City:	State:	Zip:		
b. Developer name:		Telephone:			
Address:	City:	State:	Zip:		
E-mail address:					

9. Please identify the individual from 7. or 8. that will serve as the primary contact: 7a. 7b. 8a. 8b.

10. Reason for re-zone/conditional use:

11. Re-zone/conditional use location:	Town of _____	1/4 of _____	1/4 _____
	Section _____	Tax parcel number(s) - _____	

12. Re-zone/conditional use is located adjacent to (check all that apply):

Local/Town road
 Rock County highway
 State highway
 U.S. highway

13. Landowner’s contiguous property area (Square feet or acres):	14. Re-zone/conditional use area (Square feet or acres):
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15. If you answered Re-zone to 1., indicate current zoning :	16. If you answered Re-zone to 1., indicate future zoning:
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APPLICANT STATEMENT AND SIGNATURE

I, as the undersigned, am a landowner applying for are-zone/conditional use the Town of Bradford, in unincorporated Rock County, or am serving as the primary contact for said landowner. I do hereby verify that I have reviewed the *TOWN OF BRADFORD REZONE/CONDITIONAL USE- APPLICATION FORM INFORMATION*, reviewed and completed this application form, and submitted all information as required per said documents, and that all information is correct, accurate, and true to the best of my knowledge and belief, with all information accessible to me. These statements are being made to induce official action on the part of the Town of Bradford, its agents, employees, and officials.

LANDOWNER/PRIMARY CONTACT SIGNATURE:

DATE: _____

APPLICATION FORM REQUIREMENTS, TERMS, AND CONCEPTS

THE FOLLOWING PROVIDES INFORMATION ON *ZONING CHANGE OR CONDITIONAL USE PERMIT*.
APPLICATION FORM REQUIREMENTS, TERMS, AND CONCEPTS.

PLEASE CONSULT WITH THE TOWN CLERK FOR FURTHER CLARIFICATION OR INFORMATION.

THE NUMBERS BELOW CORRESPOND TO THOSE QUESTION NUMBERS FOUND IN THE APPLICATION FORM.

1. A **Re-zone** allows for a change in a lot's zoning district, thereby changing the permitted and conditional land uses on the lot.

A **Conditional use permit (CUP)** allows for land uses on a lot subject to conditions stated in the permit and different than those normally permitted.

2. All local government units (Towns, Counties Cities, and Villages) in the State of Wisconsin are required to prepare and adopt **Comprehensive Plans**, covering all aspects of planning and development in the local government unit. All land use activities in a local government unit must be consistent with the **Future Land Use Map** as contained in their Comprehensive Plan.

3. A **State-certified Farmland Preservation zoning district** is a zoning district certified by the State of Wisconsin for agricultural use. Landowners in this district may be eligible for a State farmland preservation tax credit and lands in this district are subject to development restrictions.

4. All Towns in Rock County have State-certified Farmland Preservation zoning districts, certified by the State of Wisconsin for agricultural use. Various land use activities in **Base Farm Tracts** within these and other zoning districts are subject to certain restrictions.

Please consult with the Town clerk to ensure the proposed change meets all Town Base Farm Tract requirements.

5. **Land division** is the act or process of dividing an existing lot into two (2) or more lots in unincorporated Rock County, generally for the purpose of sale/ownership transfer or building construction or location.

6. The **Rock County Floodplain zoning district** is a zoning district administered by Rock County and containing lands identified as floodplain by the Federal Emergency Management Agency (FEMA), as delineated per the most current FEMA floodplain maps adopted by the Rock County Board of Supervisors. Lands in this district are subject to development restrictions.

The **Rock County Shoreland Overlay zoning district** is a zoning district administered by Rock County and containing lands within one thousand (1,000) feet of the ordinary high water mark of a navigable lake, flowage or pond, or within three hundred (300) feet of the ordinary high water mark of a navigable river, stream, or creek. Lands in this district are subject to development restrictions.

The **Rock County Airport Overlay zoning district** is a zoning district administered by Rock County and containing lands adjacent to and in close proximity to the Southern Wisconsin Regional Airport. Lands in this district are subject to development restrictions.

Please consult with the Rock County Planning, Economic & Community Development Agency ("Agency") to determine whether a proposed zoning/land use change area is in any of these districts. The Agency can be reached at (608) 757-5587, planning@co.rock.wi.us, or 51 S. Main St., Janesville, WI 53545. <https://www.co.rock.wi.us/planning>

APPLICATION CHECKLIST

	Yes	No	Comment
1. Have you included a map clearly marked "Re-zone or Conditional Use", identifying the area and containing all of the following information?	<input type="checkbox"/>	<input type="checkbox"/>	
a. Location of the re- zone/conditional use area by section, township, and range:	<input type="checkbox"/>	<input type="checkbox"/>	
b. Approximate location and dimension of EXISTING/PROPOSED property lines, including ownership, in the re-zone/conditional use area:			
c. Approximate location and dimension of all EXISTING/PROPOSED streets, including name, in and adjacent to the re- zone/conditional use area:	<input type="checkbox"/>	<input type="checkbox"/>	
d. Approximate location and dimension of all EXISTING property lines, including ownership name and zoning designation, within one thousand (1,000) feet of the re-zone/conditional use area:	<input type="checkbox"/>	<input type="checkbox"/>	
e. Scale, north arrow, and date of creation:	<input type="checkbox"/>	<input type="checkbox"/>	
2. Has the map been prepared at a convenient scale not to exceed two hundred (200) feet to the inch, with the map pages numbered in sequence if more than one (1) page is required, and total map pages identified on each page?	<input type="checkbox"/>	<input type="checkbox"/>	
3. Have you provided all required application form information and has the required party signed the application form?			
4. Have you included TEN copies of this application form, TEN hard copies of the map, and the application fee?	<input type="checkbox"/>	<input type="checkbox"/>	

THANK YOU FOR COMPLETING THE TOWN OF BRADFORD RE-ZONE or CONDITIONAL USE– APPLICATION FORM.

PLEASE SEND VIA POSTAL MAIL, OR HAND-DELIVER BY APPOINTMENT ONLY, TEN (10) COPIES OF THIS APPLICATION FORM, TEN (10) COPIES OF THE RE-ZONE/CONDITIONAL USE MAP, AND THE APPLICATION FEE TO:

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