

CONDITIONAL USE PERMIT APPLICATION

Applicant (name and address):

Gundersen Health System
1900 South Ave
La Crosse WI 54601

Owner of site (name and address):

Gundersen Lakemon Administrative Services
1900 South Ave
La Crosse WI 54601

Architect (name and address), if applicable:

NA

Professional Engineer (name and address), if applicable:

NA

Contractor (name and address), if applicable:

Fowler + Hammer
157 Summer St.
La Crosse WI 54603

Address of subject premises: 1502 9th St. South

Tax Parcel No.: 17-30082-80

Legal Description: See Attachment

Zoning District Classification: R4 - Low density Multiple

Conditional Use Permit Required per La Crosse Municipal Code sec. 115-353
(If the use is defined in 115-347(6)(c)(1) or (2), see "*" below.)

Is the property/structure listed on the local register of historic places? Yes _____ No X

Description of subject site and **current** use (include such items as number of rooms, housing units, bathrooms, square footage of buildings and detailed use, if applicable). If available, please attach blueprint of building(s):

House was recently purchased as single family home with the intent to move or demo the home and include the property in the conditionally approved parking lot adjacent to it.

Description of **proposed** site and operation or use (include number of rooms, housing units, bathrooms, square footage of buildings and detailed use). If available, please attach blueprint of building(s):

Site will be included in the conditionally approved parking lot adjacent to it.

Type of Structure (proposed): NA

Number of **current** employees, if applicable: NA

Number of **proposed** employees, if applicable: NA

CITY OF LA CROSSE, WI
General Billing - 141825 - 2016
003205-0029 Amber W. 10/19/2016 09:45AM
186597 - FOWLER & HAMMER, INC.

Payment Amount: 750.00

Received from
Amber W. 10/19/2016

186597 - FOWLER & HAMMER, INC.

10/19/2016

186597 - FOWLER & HAMMER, INC.

Number of **current** off-street parking spaces: 2

Number of **proposed** off-street parking spaces: 12

Check here if proposed operation or use will be a parking lot: X

Check here if proposed operation or use will be green space: _____

* If the proposed use is defined in 115-347(6)(c)(1) or (2)

_____ (1) and is proposed to have 3 or more employees at one time, a 500-foot notification is required and off-street parking shall be provided.

_____ (2) a 500-foot notification is required and off-street parking is required.

If the above paragraph is applicable, the Conditional Use Permit shall be recorded with the County Register of Deeds at the owner's expense.

In accordance with Sec. 115-356 of the La Crosse Municipal Code, a Conditional Use Permit is not required for demolition permits if this application includes plans for a replacement structure(s) of equal or greater value. **Any such replacement structure(s) shall be completed within two (2) years of the issuance of any demolition or moving permit.**

I hereby certify under oath the **current** value of the structure(s) to be demolished or moved is \$69,000 tax assessed value

I hereby certify under oath the value of the **proposed** replacement structure(s) is \$54,000 paved improvements

If the above paragraph is applicable, this permit shall be recorded and should the applicant not complete the replacement structure or structures of equal or greater value within two (2) years of the issuance of any demolition and moving permit, then the applicant or the property shall be subject to a forfeiture of up to \$5,000 per day for each day the structure(s) is not completed.

CERTIFICATION: I hereby certify that I am the owner or authorized agent of the owner (include affidavit signed by owner) and that I have read and understand the content of this application and that the above statements and attachments submitted hereto are true and correct to the best of my knowledge and belief.

Kraig Schue (signature) 10-14-16 (date)

608-775-1491 (telephone)

stcaine@gundersenhealth.org (email)

STATE OF WISCONSIN)
)ss.
COUNTY OF LA CROSSE)

Personally appeared before me this 14th day of Oct, 2016, the above named individual, to me known to be the person who executed the foregoing instrument and acknowledged the same.

Barb K. Bulman
Notary Public
My Commission Expires 9/13/2018

PETITIONER SHALL, **BEFORE FILING**, HAVE APPLICATION REVIEWED AND INFORMATION VERIFIED BY THE DIRECTOR OF PLANNING & DEVELOPMENT.

Review was made on the 14th day of October, 2016.

Signed: [Signature], Senior Planner
Director of Planning & Development

1502 9TH ST S LA CROSSE

Parcel: 17-30082-80
Internal ID: 31554
Municipality: City of La Crosse
Record Status: Current
On Current Tax Roll: Yes
Total Acreage: 0.123
Township: 15
Range: 07
Section: 08
Qtr: NW-NW

Abbreviated Legal Description:

SECOND PLAT B B HEALYS ADDN LOT 1 BLOCK 8 LOT SZ: 51.5 X 102

Property Addresses:

Street Address	City(Postal)
1502 9TH ST S	LA CROSSE

Owners/Associations:

Name	Relation	Mailing Address	City	State	Zip Code
GUNDERSEN LUTHERAN ADMINISTRATIVE SERVICES INC	Owner	1900 SOUTH AVE	LA CROSSE	WI	54601

Districts:

Code	Description	Taxation District
2849	LA CROSSE SCHOOL	Y
3	Book 3	N
0034	La Crosse TIF 14	N

Additional Information:

Code	Description	Taxation District
2012+ VOTING SUPERVISOR	2012+ Supervisor District 9	
2012 + VOTING WARDS	2012+ Ward 16	
POSTAL DISTRICT	LACROSSE POSTAL DISTRICT 54601	
Use	1 UNIT	

Lottery Tax Information:

Lottery Credits Claimed: 0
Lottery Credit Application Date:

Tax Information:

Billing Information:

Bill Number: 6958

Billed To: WILL E VONRUDEN, HEIDI K PARR
(LE) GERALD C, NANCY J
VONRUDEN
1502 9TH ST S
LA CROSSE WI 54601-5420

Total Tax: 1799.55

Payments Sch.

1-31-2016	352.50
3-31-2016	482.35
5-31-2016	482.35
7-31-2016	482.35

Tax Details:

	Land Val.	Improv Val.	Total Val.	Assessment Ratio	0.937156002
Assessed:	11000	58000	69000	Mill Rate	0.029127370
Fair Market:	11700	61900	73600	School Credit:	143.88
Taxing Jurisdiction:			2014 Net Tax	2015 Net Tax	% of Change
STATE OF WISCONSIN			\$ 12.2200	\$ 12.4900	2.2000
La Crosse County			\$ 265.0400	\$ 270.2500	2.0000
Local Municipality			\$ 844.4600	\$ 844.3500	0.0000
LA CROSSE SCHOOL			\$ 767.1500	\$ 766.5600	-0.1000
WTC			\$ 114.6700	\$ 116.1300	1.3000
	Credits:				
	First Dollar Credit:			80.38	
	Lottery Credit:			129.85	
	Additional Charges:				
	Special Assessment:			0.00	
	Special Charges:			0.00	
	Special Delinquent:			0.00	
	Managed Forest:			0.00	
	Private Forest:			0.00	
	Total Woodlands:			0.00	
	Grand Total:			1799.55	

Payments & Transactions

Desc.	Rec. Date	Rec. #	Chk #	Total Paid	Post Date	Comment
Payment to Local Municipality	1/19/2016	483434	0	\$ 834.85	1/2016	
Payment to Local Municipality	5/5/2016	518364	0	\$ 964.70	5/2016	
			Totals:	\$ 1799.55		

Assessment Information:

Class	Description	Year	Acreage	Land	Improvements	Total	Last Modified
GI	Residential	2015	0.123	11000	58000	69000	4/18/2013

Deed Information:

The following documents are those that impact the transfer of ownership or the legal description of the parcel. There may be other documents on file with the Register of Deeds Office.

Volume Number	Page Number	Document Number	Recorded Date	Type
499	486	813098	9/21/1971	WD PRIOR 9-1-81
0	0	1681981	9/16/2016	Quit Claim Deed Warranty Deed

Outstanding Taxes

There are no outstanding taxes for this property.

Permits Information:

Municipality: City of La Crosse
Property Address: 1502 9TH ST S

Click on the permit number for additional details regarding the permit.

Description	Per. #	Applicant Name	Status	Status Date	Activity
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History Information:**Parent Parcel(s)**

There are no parent parcels for this property.

There are no parent parcels for this property.

Child Parcel(s)

The following parcel(s) were created from the parcel currently being viewed

Parcel Parent	Internal ID	Date
17-30082-80	<u>70582</u>	8/10/2016

