REQUEST FOR EXCEPTION TO STANDARDS

Pd \$300.00 Inv 171387

(Check One)

X	MULTI-FAMILY HOUSING DESIGN
	COMMERCIAL DESIGN

Applicant (name and address):

Trueline Inc.

124 Division St, La Crosse, WI 54601

Owner of site (name and address):

Trueblood Properties, LLC c/o Trueline, Inc. 124 Division St, La Crosse, WI 54601

Architect (name and address), if applicable:

N/A

Professional Engineer (name and address), if applicable:

David Holstrom 411 La Crosse Street, La Crosse Wisconsin 54601

Contractor (name and address), if applicable:

N/A

Address of subject premises:

604 2nd St S., La Crosse Wisconsin 5460

Tax Parcel No :

17-30103-30

Legal Description:

CAMERONS ADDITION LOT 1 & PRT LOT 2 BLOCK 23 BEG NE COR BLK 23 S 92.5FT W 64.3FT S 21.6FT W 117.7FT N TO NW COR BLK 23 E TO POB EX COM SE COR LOT 3 NOD20M14SE 89.79FT ALG W R/W 2ND ST S89D37M13SW 64.3FT TO POB S0D20M14SW 21.6FT S89D37M13SW 14.13FT N0D20M14SE 21.6FT N89D37M13SE 14.13FT TO POB SUBJ TO ESMT IN DOC NO. 1598629 LOT SZ IRR

Details of Exception Request:

Exception to the requirement that the first-floor facade include windows equaling at least 20% of total area of facade along 2nd Street South.

Please explain why the standards of this ordinance should not apply to your property:

- The building will be used for industrial purpose. Windows on the first floor are uncommon in such buildings, cause structural weakness in the building in which stamping may be done and allows public to review Trueline proprietary processes.
- 2. Not having windows is consistent with the neighboring blocks as the buildings start having industrial uses. See Pictures 1-
- With respect to Cass Street, the Cass Street wall of the building will be taking the brunt of the snow, salt
 and muck pushed off the overhead Cass Street Bridge. Windows would be dirty, in danger of being broken
 and cause maintenance problems areas for dirt and water to collect.

What other options have you considered and why were they not chosen:

On 2nd Street the Owner has enlarged the second-floor windows and added other aesthetically pleasing elements in lieu of windows. On Cass Street the Owner has designed panels consistent with other East-West streets in the area.

Please explain how granting this/these exceptions is consistent with protecting the public interest; in particular, explain how it will impact adjacent properties:

A brick façade and other architectural features along 2^{nd} Street are consistent with the improvements made by Trueline, Inc to the adjacent property which was formerly the run down and decrepit Jacobson Storage building. As 2^{nd} Street continues south the masonry buildings are built directly to the sidewalk that provides a smooth transition to the buildings to the south. The façade on the Cass Street side is best able to withstand the conditions of being underneath the Cass Street bridge. The public interest is maintained by having a clean, well maintained building that does not have any unusual maintenance issues along that side.

Please explain the granting of the requested waiver(s) is consistent with the spirit and intent of the Ordinance; in particular, how will it meet the purpose of the Commercial District in which your property is located:

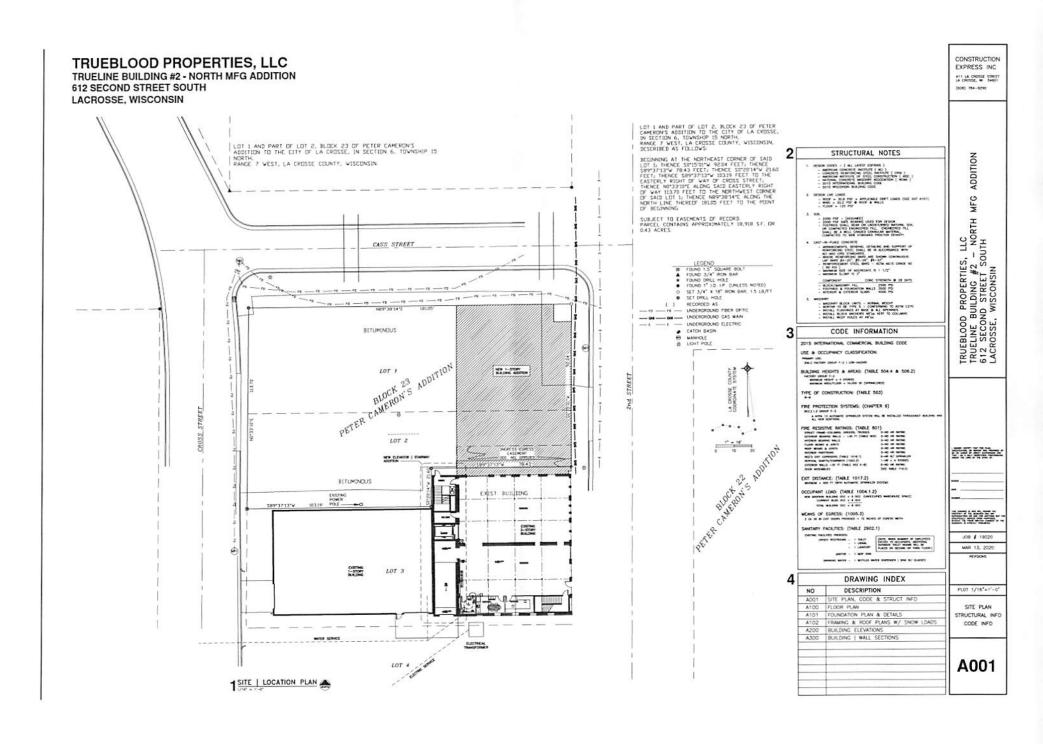
The City of La Crosse sold this parcel to Trueblood Properties, LLC in part to allow Trueline, Inc. to continue to operate and grow within the City of La Crosse. Trueline, Inc. has improved the former Jacobson Storage Building to be aesthetically pleasing and has designed this building in a manner that is consistent with the design of the Jacobson building. On several occasions Planning Director Jason Gilman has indicated that design standards are not as stringent in the southern portion of this commercial district because the uses become increasingly industrial. As a manufacturer Trueline, Inc. is operating in an industrial manner. The brick façade with second story windows in other architectural features along the 2nd Street side near the Jacobson Building and are more aesthetically pleasing than the remainder of the buildings that occur as 2nd Street moves south. Along the Cass Street side of this property, the proposed façade will be able to weather the runoff from the bridge all being consistent with concrete panels that are seen throughout the east west street throughout this commercial district. Mostly, granting of this request is consistent with the original purpose of the sale of the property for the purpose of allowing Trueline, Inc. to continue to operate and expand within the City of La Crosse.

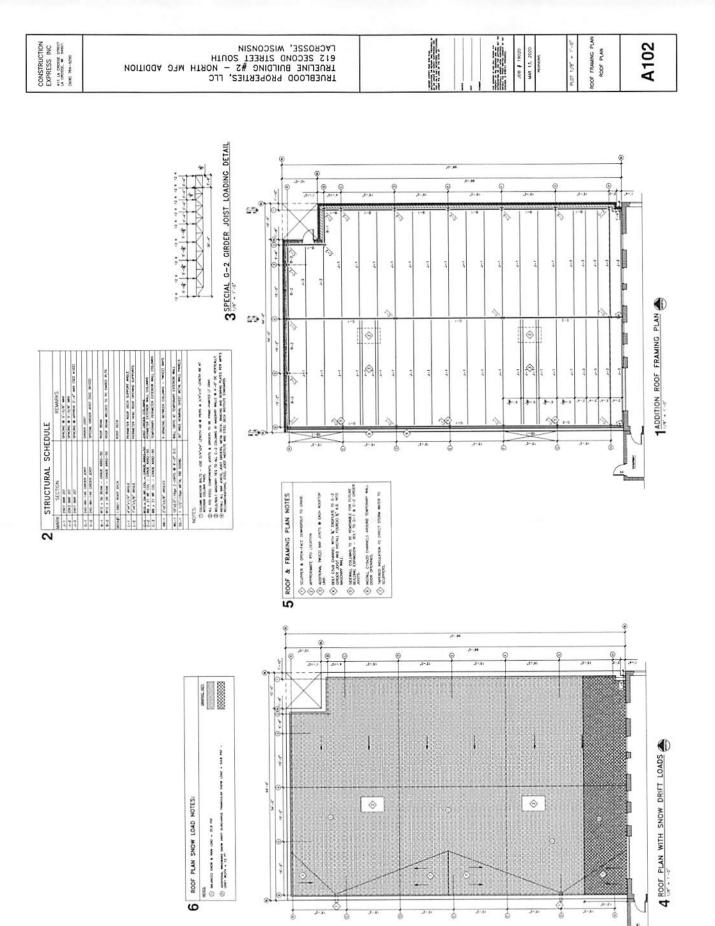
I hereby certify that I am the owner or authorized agent of the owner (include affidavit signed by owner) and that I have read and understand the content of this request and that the above statements and any attachments submitted hereto are true and correct to the best of my knowledge and belief.

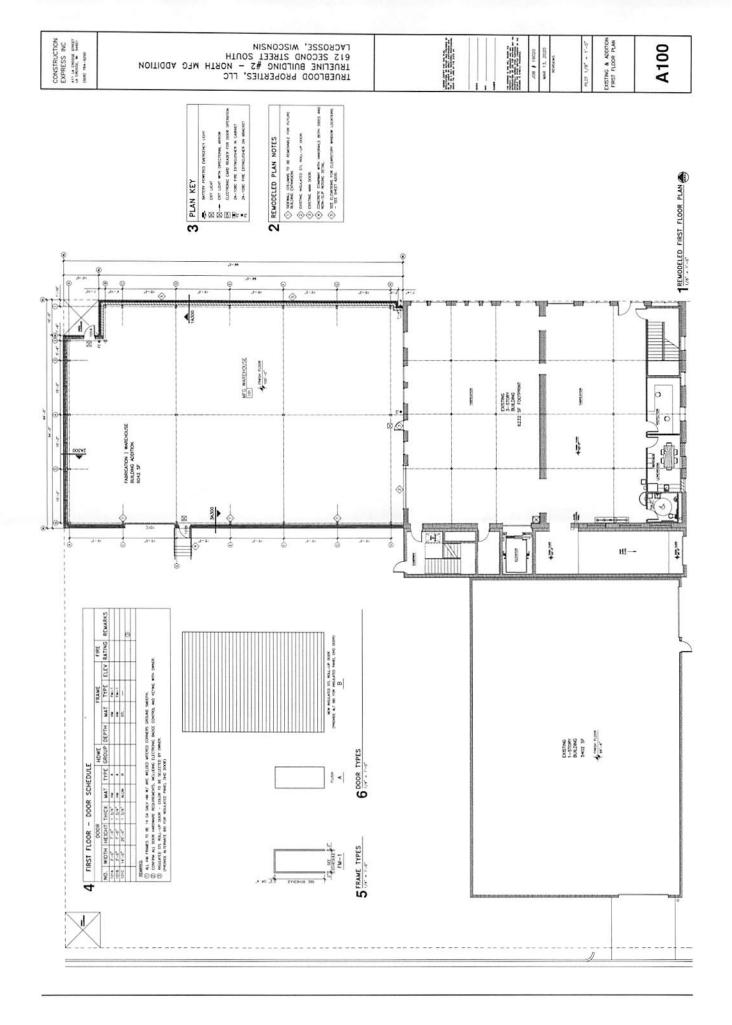
		Terry Trueblood, Member						
		(608) 782-6445 ext. 322	April 1, 2020					
		(telephone)	(date)					
		Terry@trueline-inc.com						
		(email)						
STATE OF WISCONSIN))ss.							
COUNTY OF LA CROSSE)							
Personally appeared before r	me this	day of PCI , 2020 foregoing instrument and acknow	the above named individual, to me vledged the same.					
		< n!	CUR					
Sean O'Flahert Notary Public, State of V	y Wisconsin	Notary Public My Commission Expires:	Reserved					

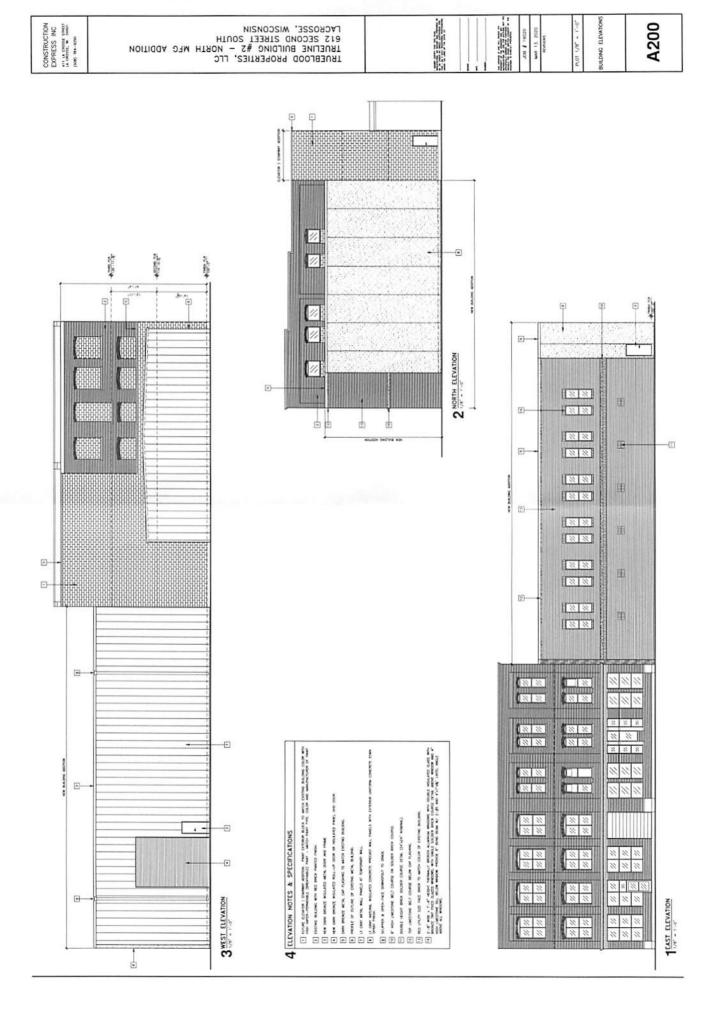
Applicant shall, before filing with the City Clerk's Office, have this application reviewed and the information verified by the Director of Planning & Development.

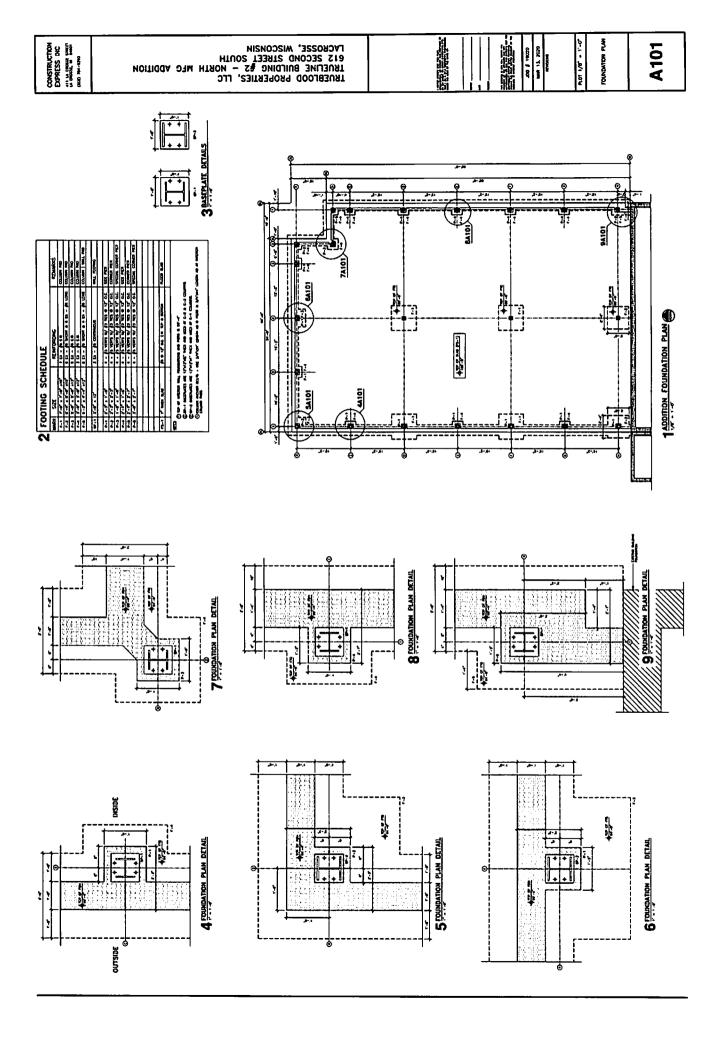
Review was made on the 32 day of April 2020
Signed: Director of Planning & Development

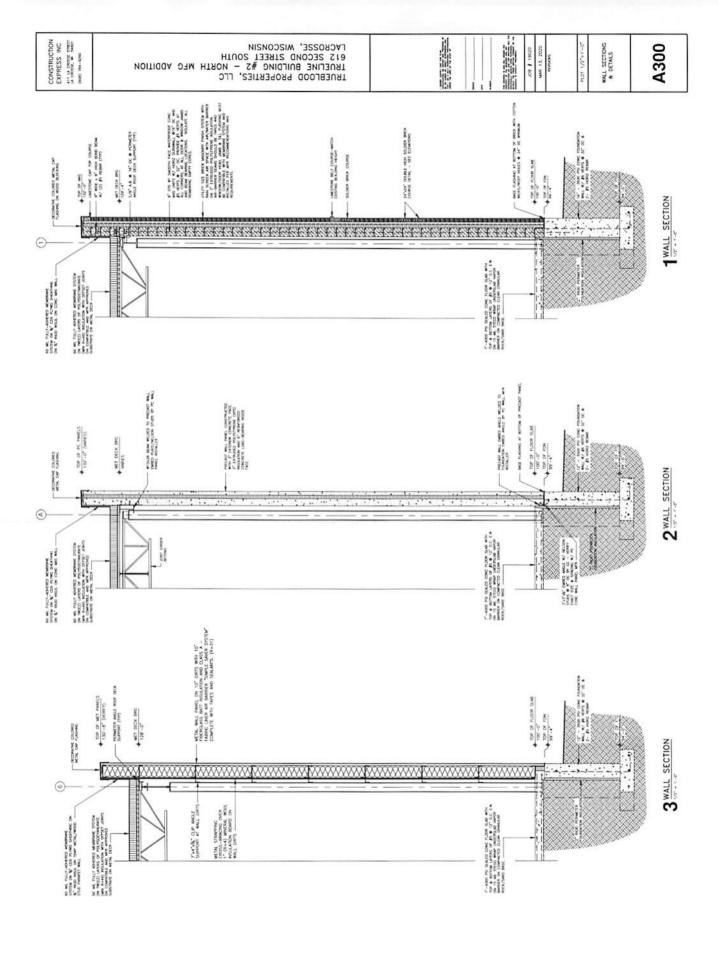














CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/31/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

this certificate does not confer rights t						require an endorsem	ent. A s	statement on			
PRODUCER	0 1110 0011		CONTAC NAME:		-						
McGriff, Seibels & Williams of Missouri, Inc. 7711 Bonhomme Avenue	PHONE STATES OF STATES										
Suite 900	(A/C, No, Ext): 314-854-5200 (A/C, No): E-MAIL ADDRESS:										
St. Louis, MO 63105	1101	1/80	INSURER(S) AFFORDING COVERAGE			NAIC #					
/4	1	A	INSURER A :US Specialty Insurance Company								
INSURED	Dr	Country (INSURER B :Atlantic Specialty Insurance Company				27154				
J.F. Brennan Company, Inc. Brennan Marine, Inc.	INSURER 6 :Arch Insurance Company				11150						
P.O. Box 2557	APR 0 3 2020		The Company of the Co				11130				
818 Bainbridge St. La Crosse, WI 54602-2557			INSURER D:								
La 010350, VII 34002-2337		City [City	INSURER E :								
COVERAGES CER	TIEICATI	E NUMBER:9F9TNQLR	INSURE	RF:		REVISION NUMBER:					
			VF BFFN	N ISSUED TO				LICY PERIOD			
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS.											
EXCLUSIONS AND CONDITIONS OF SUCH	POLICIES	THE INSURANCE AFFORD	BEEN RE	HE POLICIE	S DESCRIBE	D HEREIN IS SUBJECT	TO ALL	THE TERMS,			
INSR LTR TYPE OF INSURANCE	ADDL SUBR			POLICY EFF (MM/DD/YYYY)		LIMITS					
C X COMMERCIAL GENERAL LIABILITY	INSD WVD	POLICY NUMBER 41PKG8957701		04/01/2020	(MM/DD/YYYY) 04/01/2021	100		1,000,000			
CLAIMS-MADE X OCCUR			I, Serbet-Warastelly		EACH OCCURRENCE DAMAGE TO RENTED		300,000				
X \$50,000 deductible						PREMISES (Ea occurrence)	\$	10,000			
,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						MED EXP (Any one person)	\$	1,000,000			
GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	5	2,000,000			
PRO-						GENERAL AGGREGATE	\$	2,000,000			
Jeci Las						PRODUCTS - COMP/OP AG	G \$	2,000,000			
OTHER: C AUTOMOBILE LIABILITY		41PKG8957701		04/01/2020	04/01/2021	COMBINED SINGLE LIMIT		200200000000000000000000000000000000000			
X ANY AUTO		Hired Physical Damage \$1,000 Comp/\$1,000 Coll		04/01/2020	040112021	(Ea accident)	\$	2,000,000			
OWNED SCHEDULED		\$1,000 Comp/\$1,000 Com			BODILY INJURY (Per person	1000					
AUTOS ONLY AUTOS NON-OWNED					BODILY INJURY (Per accider PROPERTY DAMAGE	196 (620)					
AUTOS ONLY AUTOS ONLY						(Per accident)	\$				
A UMBRELLA LIAB X OCCUR		US Specialty #CXS10967.040	2	04/01/2020	04/04/2024		-	40,000,000			
B V SYSTERIUS HOCCOR		Atlantic Specialty #B5JH0388 Stratford # VMX8000448, and	34, 1 XL	04/01/2021	EACH OCCURRENCE	\$	19,000,000				
CEANNO-WADE		Specialty #UM00084264MA20			AGGREGATE	\$	19,000,000				
C WORKERS COMPENSATION		41WCI8957501	_	04/01/2020	04/01/2021	∨ PER OT	\$ H.				
AND EMPLOYERS' LIABILITY	44WCl8957601 Includes USL&H		04/01/2020	04/01/2021	^ STATUTE E	3	4 000 000				
ANY PROPRIETOR/PARTNER/EXECUTIVE N					E.L. EACH ACCIDENT	\$	1,000,000				
(Mandatory in NH) If yes, describe under						E.L. DISEASE - EA EMPLOY		1,000,000			
DÉSCRIPTION OF OPERATIONS below		-				E.L. DISEASE - POLICY LIM	T \$	1,000,000			
							S				
							\$				
DESCRIPTION OF OPERATIONS (LOCATIONS (VEHIC	LEC (ACODE	2404 44444 4 12 4 1 1 1 1 1 1					\$				
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHIC Certificate holder is added to the above referen	nced Gene	ral Liability and Automobile L	le, may be iability po	attached if more	space is require ditional insure	ed) d on a primary basis to a	ny other	insurance to			
certificate holder but only with regards to the o Subject to Policy Terms, Conditions and Exclu	perations of	of the named insured and as r	required l	by written con	tract. XCU is	not excluded from the Ge	neral Lia	bility Policy.			
Subject to Policy Terms, Conditions and Excit	sions.										
CERTIFICATE HOLDER											
CERTIFICATE HOLDER			CANC	ELLATION							
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.										
The City of La Crosse, its elected and appointed officials, officers, employees, authorized representatives or volunteers 400 La Crosse Street La Crosse, WI 54601											
				C. Barter Southern III							
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