

CONDITIONAL USE PERMIT APPLICATION

Applicant (name and address):
La Crosse County (dba Hillview Health Care Center)
3501 Park Lane Drive, La Crosse, WI 54601



Owner of property (name and address), if different than Applicant:

Architect (name and address), if applicable:
Hoffman Planning, Design & Construction
122 East College Avenue, Suite G, Appleton, WI 54911

Professional Engineer (name and address), if applicable:
Chase Rettler, Rettler Corporation
3317 Business Park Drive, Stevens Point WI, 54482

Contractor (name and address), if applicable:
Hoffman Planning, Design & Construction
122 East College Avenue, Suite G, Appleton, WI 54911

Address(es) of subject parcel(s): 3501 Park Lane Drive, La Crosse, WI 54601

Tax Parcel Number(s): 17-50310-30

Legal Description (must be a recordable legal description; see Requirements):
PARCEL C, LACROSSE COUNTY HILLVIEW PROPERTY LOCATED IN THE S1/2-SW1/4 OF SECTION 10 & N1/2-NW1/4 OF SECTION 15, ALL BEING IN T15N-R7W, CITY OF LACROSSE, LACROSSE COUNTY, WI
Zoning District Classification: PS - Public and Semi-Public *& Consistency*

A Conditional Use Permit is required per La Crosse Municipal Code Sec. 115-364
If the use is defined in Sec.:

- 115-347(6)(c)(1) or (2), see "" on the next page.
- 115-353 or 356, see "" on the next page.

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

Description of subject site and **CURRENT** use: See attached Cover Letter

Description of **PROPOSED** site and operation/use (detailed plan of the proposed site):
See attached site plan drawings and operational plan.

Type of Structure **proposed**: Community Based Residential Facility (CBRF)

Number of **current** employees, if applicable: 145

Number of **proposed** employees, if applicable: 110

Number of **current** off-street parking spaces: 250

Number of **proposed** off-street parking spaces: 212

* If the proposed use is defined in Sec. 115-347(6)(c) Not applicable

_____ (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. Will there be 3 or more employees at one time? Y__ N__

or

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

Where the side or rear lot line abuts or is located across an alley from any residential zoning district, abutting residential property owners shall be notified of the privacy fence provision by the City Clerk.

Any Conditional Use Permit required pursuant Sec. 115-347(6) shall be recorded with the La Crosse County Register of Deeds at the owner's expense.

**If the proposed use is defined in Sec. 115-353 or 115-356, abutting property owners shall be notified of the privacy fence provision by the City Clerk.

Not applicable

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

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

Applicant/property owner may be subject to a payment in lieu of taxes for a period of twenty (20) years or until the property tax valuation of any new structure or improvements is equal to or greater than the base year valuation of the improvement or structure being demolished.

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

If the above paragraph is applicable, the Conditional Use Permit shall be recorded with the La Crosse County Register of Deeds and should the applicant not complete the replacement structure of equal or greater value within two (2) years of the issuance of any demolition/moving permit, the applicant or property owner shall be subject to a forfeiture of up to \$5,000 per day for each day not completed.

CERTIFICATION: I hereby certify that I am the owner of the subject parcel(s) or authorized agent 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.

[Signature] (signature) 7-8-22 (date)

608-386-4522 (telephone) rwestpfahl@lacrossecounty.org (email)

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

Notary not required

Personally appeared before me this _____ day of _____, 20____, the above named individual, to me known to be the person who executed the foregoing instrument and acknowledged the same.

Notary Public
My Commission Expires: _____

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 14th day of July, 2022.

Signed: [Signature]
Director of Planning & Development

not required prior to application