

CONDITIONAL USE PERMIT APPLICATION

Applicant (name and address):

434 Holdings, Inc. 8022 Polo Club Lane  
C/O Mike Ferro Sarasota, FL 34240

Payment Amount: 250.00

Owner of site (name and address):

434 Holdings, Inc. 8022 Polo Club Lane  
C/O Mike Ferro Sarasota, FL 34240

Architect (name and address), if applicable:

Vantage Architects, Inc. Jerry Schomberg  
750 North Third Street Suite E  
La Crosse, WI 54601

Professional Engineer (name and address), if applicable:

Contractor (name and address), if applicable:

Wieser Brothers General Contractor, Inc.  
200 Twilite Street  
La Crescent, MN 55947

Address of subject premises: 434 3rd Street, La Crosse, WI

Tax Parcel No.: 17-20028-70

Legal Description: C&F J Dunn, H L Dousman & Peter Camerons Addition Lots 10 & 11 Block 9 & Lot 9 Block 9 EX BEG  
SE COR W 171 FT N 4FT E 151FT N45DE 28.3 FT S to POB

Zoning District Classification:

Conditional Use Permit Required per La Crosse Municipal Code sec. 115-356  
(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

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):

Former Habitat of Humanity Re-Sale Store  
Former Hilton Medical Supply  
Both buildings will be vacant after 2/15/2015

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):

434 Holding, Inc. is in the planning and permitting process of constructing a 92 unit Fairfield Inn and Suites hotel where the current Habitat for Humanity and Hilton Medical Supply buildings are. Final building plans are scheduled to be submitted to the State of Wisconsin in May of 2015. In an effort to speed up the construction process we are requesting a demolition permit to raze the current building on Parcel 17-200028-70, 434 3rd Street, before final building permits are secured.

Type of Structure (proposed): Wood Framed Multi-Story Hotel

Number of current employees, if applicable:

Number of proposed employees, if applicable:

Number of current off-street parking spaces: \_\_\_\_\_

Number of proposed off-street parking spaces: \_\_\_\_\_

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

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 \$ 97,500.

I hereby certify under oath the value of the proposed replacement structure(s) is \$ 10 million.

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.

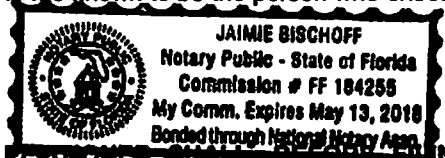
CERTIFICATION: I hereby certify that I am the owner or authorized agent of the owner (include affidavit signed by owner) and that I have read and understand the content of this application and that the above statements and attachments submitted hereto are true and correct to the best of my knowledge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

[Signature] 1/23/15  
(signature) (date)

941 377 3692 FERN ENTERPRISES  
(telephone) (email) LLC @ GMAIL.COM

Florida  
STATE OF ~~WISCONSIN~~ )  
manatee ) ss.  
COUNTY OF ~~LA CROSSE~~ )

Personally appeared before me this 23 day of January, 2015, the above named individual, to me known to be the person who executed the foregoing instrument and acknowledged the same.



Jaimie Bischoff  
Notary Public  
My Commission Expires: May 13, 2018

~~PERSONER SHALL SIGN~~ PERSONER SHALL SIGN HAVE APPLICATION REVIEWED AND INFORMATION VERIFIED BY THE DIRECTOR OF PLANNING & DEVELOPMENT.

Review was made on the 4th day of February, 2014.

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