

REQUEST FOR EXCEPTION TO STANDARDS

(Check One)

MULTI-FAMILY HOUSING DESIGN
 COMMERCIAL DESIGN

Applicant (name and address):

STEVE SCHLICHT 1910 S. 31ST ST. LACROSSE WI. 54601

Owner of site (name and address):

STEVE SCHLICHT

Architect (name and address), if applicable:

NONE

Professional Engineer (name and address), if applicable:

NONE

Contractor (name and address), if applicable:

S+S FRAMING 729 LACROSSE ST. LACROSSE WI 54601

Address of subject premises:

1024 - 1034 - 1038 DENTON ST. LACROSSE

Tax Parcel No.: 17-30032-80 COMBINED #

Legal Description: (LAST PAGE ATTACHED)

Details of Exception Request:

I, STEVE SCHLICHT REQUEST THAT A LISCENSED ARCHITECT SHOULD NOT BE REQUIRED IN THIS PROJECT.

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

THE BUILDING IS UNDER 50,000 CUBIC FT. WHICH THE STATE OF WISCONSIN DOES NOT REQUIRE A STATE APPROVAL OR STAMP

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Address of subject premises:

Tax Parcel No.

Legal Description

Details of Exception Request

Please explain why the standards of the ordinance should not apply to your request.

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

I AM THE BUILDER OF THE 7th + JACKSON ST. BUILDING AND IT IS THE SAME, LICENSED ARCHITECT WAS NOT REQUIRED

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

THESE BUILDINGS ARE A VERY BASIC WOOD FRAMED BUILDING 28' WIDE AND 72' LONG WILL LOOK VERY NICE IN THE AREA, LOT IS PLENTY BIG.

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:

GRANTING THIS REQUEST WILL BE WHAT THE CITY NEEDS TO START THIS JOB AND GET IT DONE SO UNITS CAN BE SOLD TO INDIVIDUALS FOR A GOOD PRICE

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.

[Handwritten Signature]

(signature)

608-780-3570
(telephone)

6-23-22
(date)

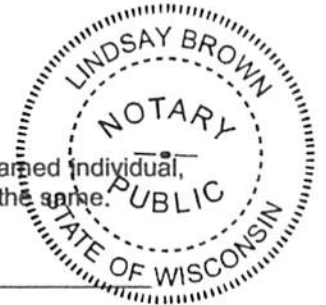
6087803570 @ CHARTER.NET
(email)

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

Personally appeared before me this 23 day of June, 2022, the above named individual, to me known to be the person who executed the foregoing instrument and acknowledged the same.

[Handwritten Signature: Lindsay Brown]
Notary Public

My Commission Expires: 02/25/2025



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 23rd day of June, 2022.

When other parties have you contacted and why they not respond

Please explain how paying these expenses is consistent with providing the best interest to particular explain how it will meet the purpose of the Commercial Code in which your property is located

Please explain how paying of the requested (mortgage) is consistent with the spirit and intent of the Commercial Code in which your property is located

I hereby certify that I am the owner or authorized agent of the above named (debtor) and that I have read and understand the content of this report and that the statements and any attachments contained herein are true and correct to the best of my knowledge and belief

(Signature)

(Telephone)

(Address)

STATE OF WISCONSIN

COUNTY OF WAUSAU

I hereby certify that I am the owner or authorized agent of the above named (debtor) and that I have read and understand the content of this report and that the statements and any attachments contained herein are true and correct to the best of my knowledge and belief



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

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Signed: Andrea Trane - per email
Director of Planning & Development



CHICAGO TITLE INSURANCE COMPANY

Transaction Identification Data for reference only:

Issuing Agent: New Castle Title of La Crosse, Inc.
 Issuing Office: 750 3rd St N, Ste B, La Crosse, WI 54601
 ALTA® Universal ID:
 Loan ID Number:
 Issuing Office File Number: 22-WI-99820
 Commitment Number: 22-WI-99820
 Revision Number:
 Property Address: 1024 Denton Street; 1034-1038 Denton Street, La Crosse, WI 54601

SCHEDULE A

1. Commitment Date: 02/09/2022 at 4:30 PM
2. Policy to be issued:

(a) ALTA Owner's Policy	\$41,900.00
PROPOSED INSURED: Steve Schlicht	
3. The estate or interest in the Land described or referred to in this Commitment is: fee simple.
4. Title to the fee simple estate or interest in the Land is at the Commitment Date vested in:

City of La Crosse
5. The Land is described as follows:

Part of Lot 17 of Peterson's Addition to La Crosse and part of the NE 1/4 of the NW 1/4 of Section 8, Township 15 North of Range 7 West, City of La Crosse, La Crosse County, Wisconsin, lying North of said Lot 17, described as follows: Beginning at a point 46 feet West of the Southeast corner of said Lot 17; thence West along the South line thereof, 90 feet; thence North 120 feet, more or less, to the South line of Denton Street; thence East along said South line of Denton Street, 90 feet; thence South 120 feet, more or less, to the point of beginning.

The East 1/2 of the East 2/3 of the West 1/2 of Lot 17 of Peterson's Addition to La Crosse, in the City of La Crosse, La Crosse County, Wisconsin, and part of the NE 1/4 of the NW 1/4 of Section 8, Township 15 North of Range 7 West, City of La Crosse, La Crosse County, Wisconsin, being the same width East and West, adjoining said part of Lot 17 on the North and extending North to the South line of Denton Street.

Tax Parcel No. 17-30032-80 is the combined tax parcel number.

Tax Parcel No. 17-30032-70
The 2021 taxes are in the amount of \$0.00.

Tax Parcel No. 17-30032-80
The 2021 taxes are in the amount of \$2,439.88, with First Dollar Credit of \$74.88, for net balance of \$2,365.00, which is paid in full.

This page is only a part of a 2016 ALTA® Commitment for Title Insurance issued by Commonwealth Land Title Insurance. This Commitment is not valid without the Notice; the Commitment to Issue Policy; the Commitment Conditions; Schedule A; Schedule B, Part I—Requirements; and Schedule B, Part II—Exceptions; and a counter-signature by the Company or its issuing agent that may be in electronic form.

ALTA Commitment for Title Insurance **9-1-16**

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CHICAGO TITLE INSURANCE COMPANY



Transaction Information: Policy No. 1001-1001, Date of Issue 01/01/2001, Issued By: Chicago Title Insurance Company, 1001 North Dearborn Street, Chicago, IL 60610.

SCHEDULE A

1. The insured is the owner of the property described in Schedule B as of 01/01/2001.

2. The insured is the owner of the property described in Schedule B as of 01/01/2001.

3. The insured is the owner of the property described in Schedule B as of 01/01/2001.

(a) ALL-TITLE Insurance Policy

4. The insured is the owner of the property described in Schedule B as of 01/01/2001.

5. The insured is the owner of the property described in Schedule B as of 01/01/2001.

6. The insured is the owner of the property described in Schedule B as of 01/01/2001.

(b) Title Insurance

7. The insured is the owner of the property described in Schedule B as of 01/01/2001.

8. The insured is the owner of the property described in Schedule B as of 01/01/2001.

9. The insured is the owner of the property described in Schedule B as of 01/01/2001.

10. The insured is the owner of the property described in Schedule B as of 01/01/2001.

11. The insured is the owner of the property described in Schedule B as of 01/01/2001.

12. The insured is the owner of the property described in Schedule B as of 01/01/2001.

13. The insured is the owner of the property described in Schedule B as of 01/01/2001.

14. The insured is the owner of the property described in Schedule B as of 01/01/2001.

15. The insured is the owner of the property described in Schedule B as of 01/01/2001.

16. The insured is the owner of the property described in Schedule B as of 01/01/2001.

17. The insured is the owner of the property described in Schedule B as of 01/01/2001.