

CONDITIONAL USE PERMIT APPLICATION

Applicant (name and address):

Mayo Clinic Health System - Franciscan Medical Center, Inc.
700 West Avenue South, La Crosse, WI 54601

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

Mayo Clinic Health System - Franciscan Medical Center, Inc.
700 West Avenue South, La Crosse, WI 54601

Architect (name and address), if applicable:

Professional Engineer (name and address), if applicable:

Paragon Associates
632 Copeland Avenue, La Crosse, WI 54603

Contractor (name and address), if applicable:

Address(es) of subject parcel(s): ¹⁰⁰⁵ 1001 Jackson Street and 930 11th Street South

Tax Parcel Number(s): 17-30062-90 and 17-30063-20

Legal Description (must be a recordable legal description; see Requirements): _____

See attached

Zoning District Classification: Public and Semi-public - PS

A Conditional Use Permit is required per La Crosse Municipal Code Sec. 115-353 _____

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

Description of subject site and CURRENT use: Current uses of site are a parking lot, an apartment building, and a vacant residential structure.

Description of PROPOSED site and operation/use (detailed plan of the proposed site):

Proposed used of site is for a parking lot. +

Type of Structure proposed: n/a

Number of current employees, if applicable: n/a

Number of proposed employees, if applicable: n/a

Number of current off-street parking spaces: 135 (total project area)

Number of proposed off-street parking spaces: 174 (total project area)

Payment Amount: 450.00

2571 - PARAGON ASSOCIATES INC

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General Billing - 166616 - 2019

CITY OF LA CROSSE, WI

* If the proposed use is defined in Sec. 115-347(6)(c)

n/a (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

n/a (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.

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

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.

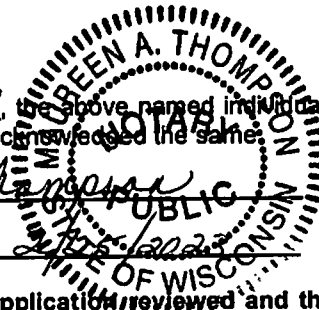
Matthew Lewis (signature) 07-02-19 (date)

608-392-2814 (telephone) lewis.matthew@mayo.edu (email)

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

Personally appeared before me this 2nd day of July, 2019, the above named individual, to me known to be the person who executed the foregoing instrument and acknowledged the same.

Maureen A. Thompson
Notary Public
My Commission Expires: 07/26/2023



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 3rd day of July, 2019.

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

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of my office at the City of New York, this 1st day of January, 1901.

Notary Public for the State of New York
MORRIS A. THOMPSON

My commission expires on the 1st day of January, 1902.

Witness my hand and the seal of my office at the City of New York, this 1st day of January, 1901.

MORRIS A. THOMPSON
Notary Public for the State of New York

My commission expires on the 1st day of January, 1902.

Witness my hand and the seal of my office at the City of New York, this 1st day of January, 1901.

MORRIS A. THOMPSON
Notary Public for the State of New York

My commission expires on the 1st day of January, 1902.

Witness my hand and the seal of my office at the City of New York, this 1st day of January, 1901.

MORRIS A. THOMPSON
Notary Public for the State of New York

My commission expires on the 1st day of January, 1902.

Witness my hand and the seal of my office at the City of New York, this 1st day of January, 1901.



AFFIDAVIT OF OWNER

STATE OF WISCONSIN)
) ss
COUNTY OF LA CROSSE)

The undersigned, MATTHEW LEWIS, being duly
(owner of subject parcel(s) for Conditional Use)

sworn states:

1. That the undersigned is an adult resident of the City of NA,
State of WISCONSIN.
2. That the undersigned is a/the legal ^{representative} owner of the property located at:
1001 JACKSON ST AND 930 11th STREET SOUTH
(address of subject parcel for Conditional Use)
3. By signing this affidavit, the undersigned property owner authorizes the application for a
conditional use permit district change or amendment (circle one) for said property.

Matthew Lewis
Property Owner **REPRESENTATIVE**

Subscribed and sworn to before me this 14th day of July, 2019.

Maura A. Thompson
Notary Public
My Commission expires 2/2/2021



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Legal Descriptions

1001, 1003, 1005 and 1007 Jackson Street, La Crosse, Wisconsin

Tax Parcel # 17-30062-90

The south half of lot 6 in block 11 of Esperson and Burns Addition to the City of La Crosse, La Crosse County, Wisconsin.

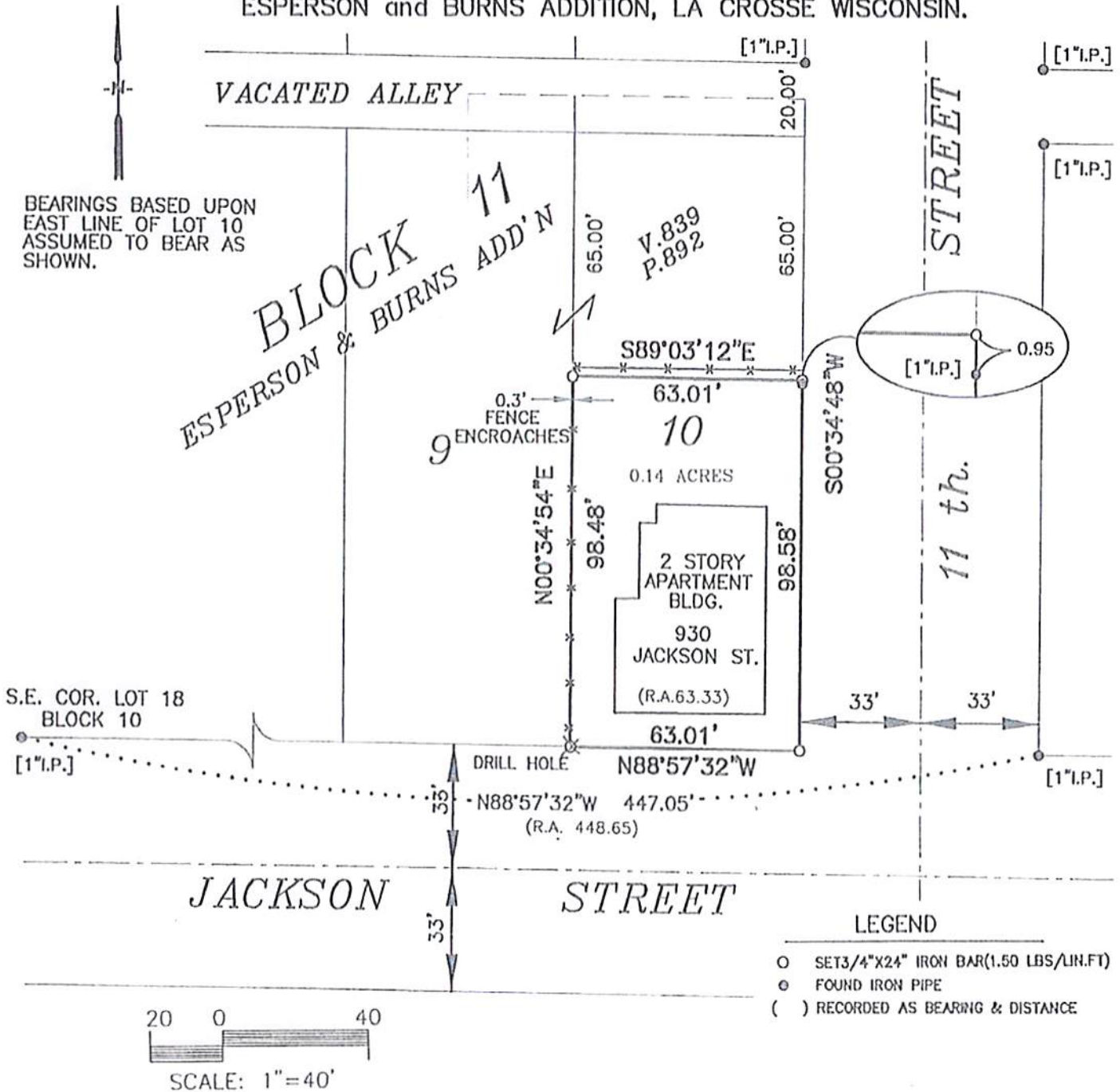
930 11th Street South, La Crosse, Wisconsin

Tax Parcel # 17-30063-20

Lot 10 except the north 65 feet in block 11 of Esperson and Burns Addition to the City of La Crosse, La Crosse County, Wisconsin.

PLAT OF SURVEY
 930 JACKSON ST.

LOT 10 EXCEPT THE NORTH 65 FEET, BLOCK 11
 ESPERSON and BURNS ADDITION, LA CROSSE WISCONSIN.



I, PAUL E. FAIRCHILD, REGISTERED LAND SURVEYOR #2058, HEREBY CERTIFY THAT I HAVE SURVEYED AND MAPPED THE ABOVE PARCEL AT THE DIRECTION OF MATT LEWIS, AND THAT THE ATTACHED SURVEY MAP IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

SURVEYOR:
 PAUL E FAIRCHILD #2058
 PARAGON ASSOCIATES
 LA CROSSE, WI. 54603

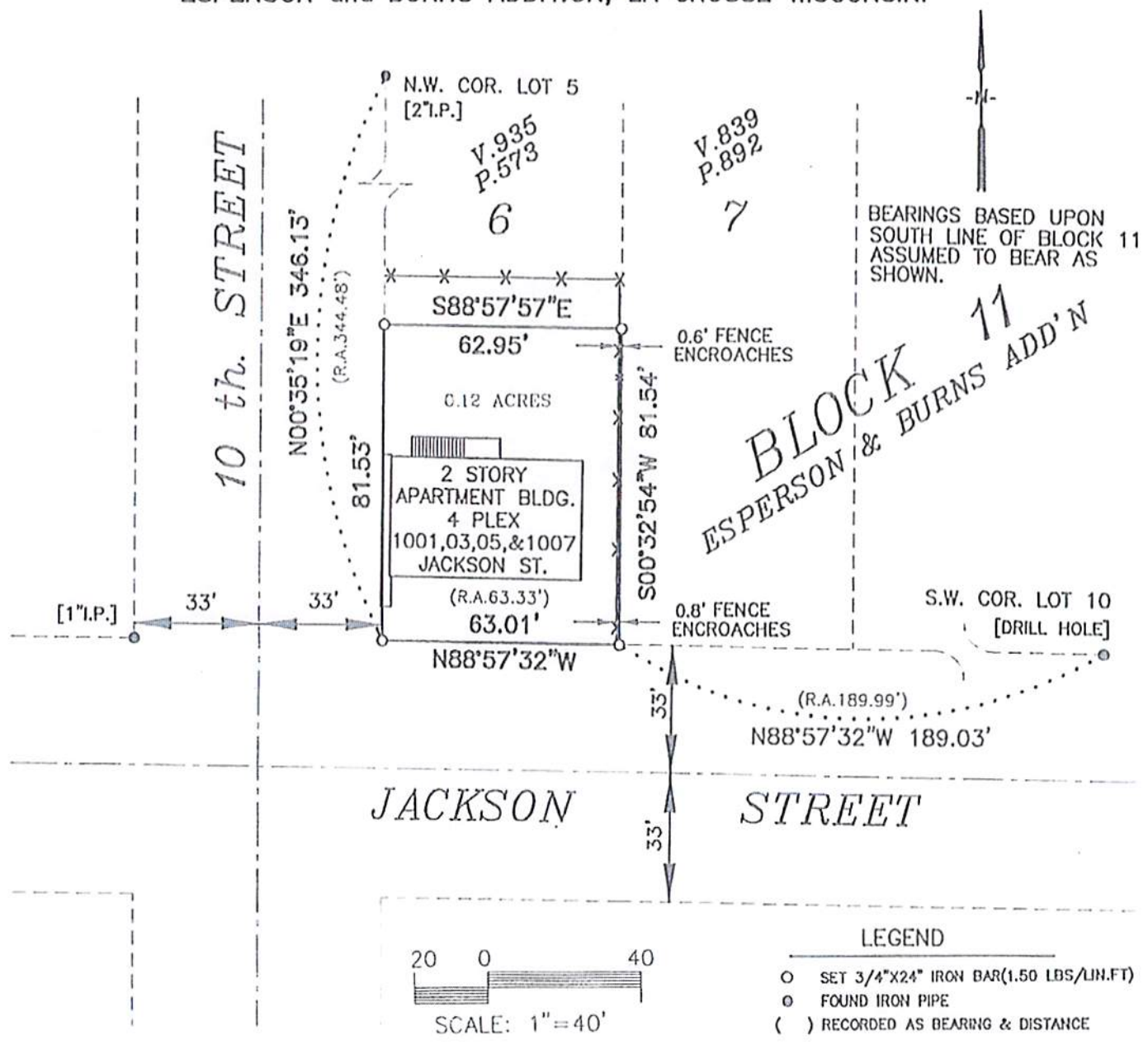


PARAGON ASSOCIATES

744 MOORE ST.
 LA CROSSE, WI 54603
 (608) 781-3110 FAX (608) 781-3197
 SURVEYING ENGINEERING
 LANDSCAPE ARCHITECTURE

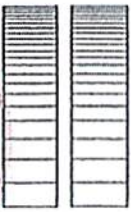
PLAT OF SURVEY
 1001,1003, 1005, 1007 JACKSON ST.

SOUTH HALF OF LOT 6 , BLOCK 11
 ESPERSON and BURNS ADDITION, LA CROSSE WISCONSIN.



I, PAUL E. FAIRCHILD, REGISTERED LAND SURVEYOR #2058, HEREBY CERTIFY THAT I HAVE SURVEYED AND MAPPED THE ABOVE PARCEL AT THE DIRECTION OF MATT LEWIS , AND THAT THE ATTACHED SURVEY MAP IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

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 PAUL E FAIRCHILD #2058
 PARAGON ASSOCIATES
 LA CROSSE, WI. 54603



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