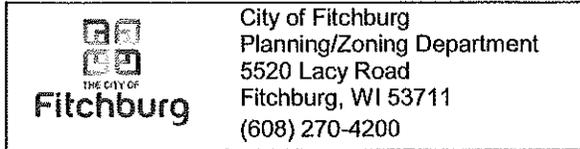


Rec 16. 002092 4/22/2020
\$480.00 RB



CONDITIONAL USE PERMIT APPLICATION

The undersigned owner, or owner's authorized agent, of property herein described hereby applies for a conditional use permit for the following described property:

1. **Location of Property:**
Street Address: 2182 County Road MM, Fitchburg, WI 53575
Legal Description - (Metes & Bounds, or Lot No. And Plat): Far North Building

***Also submit in electronic format (MS WORD or plain text) by email to: PLANNING@FITCHBURGWI.GOV

2. **Current Use of Property:** Vacant
3. **Proposed Use of Property:** Sec 22-311 (13) Recreation: Buckle's Fitness
4. **Proposed Development Schedule:** Within 3 months
5. **Zoning District:** BH Zoning

6. **Future Land Use Plan Classification:**
***Pursuant to Section 22-3(b) of the Fitchburg Zoning Ordinance, all Conditional Use Permits shall be consistent with the currently adopted City of Fitchburg Comprehensive Plan.

***Attach three (3) copies of a site plan which shows any proposed land divisions, plus vehicular access points and the location and size of all existing and proposed structures and parking areas. Two (2) of the three (3) copies shall be no larger than 11" x 17". Submit one (1) pdf document of the entire submittal to planning@fitchburgwi.gov.
Additional information may be requested.

Type of Residential Development (If Applicable): N/A
No. of Dwelling Units by Bedroom: 1 BR 2 BR 3 BR 4 or More
No. Of Parking Stalls: _____

Type of Non-residential Development (If Applicable): _____
Proposed Hours of Operation: 24/7 **No. Of Employees:** 1
Floor Area: 2,500 sq ft. **No. Of Parking Stalls:** 9
Sewer: Municipal Private **Water:** Municipal Private

Current Owner of Property: Branford Kerns
Address: 2398 White Oak Trail, Oregon **Phone No:** _____
Contact Person: Shawn Kerns 53575
Email: ShawnK3535@gmail.com
Address: 2398 White Oak Trail, Oregon **Phone No:** 608 445-2459
Respectfully Submitted By: Shawn Kerns

Owner's or Authorized Agent's Signature

** It is highly recommended that an applicant hold at least one neighborhood meeting prior to submitting an CUP application to identify any concerns or issues of surrounding residents.

PLEASE NOTE - Applicants shall be responsible for legal or outside consultant costs incurred by the City. Submissions shall be made at least four (4) weeks prior to desired plan commission meeting.

For City Use Only: **Date Received:** 4/21/20 **Publish:** _____
Ordinance Section No. _____ **Fee Paid:** \$480.00
Permit Request No. CU-2347-20

Archived: Thursday, April 23, 2020 12:14:55 PM
From: [Shawn Kerns](#)
Sent: Thursday, April 23, 2020 11:42:52 AM
To: [Lisa McNabola](#)
Subject: Re: Conditional Use Permit Application
Importance: Normal

EXTERNAL EMAIL: BEWARE OF UNKNOWN ATTACHMENTS AND LINKS.

Hi Lisa,
Thank you for your email. It can vary, due to times of the day. Peak hours are after people get off work...12 potential members at one-time I would estimate. In regards to the 24/7. Many individuals work different shifts nurses, janitors etc and I would like 24/7 so those workers have access to the fitness equipment too. Also, Anytime Fitness being in Oregon and a franchise is 24/7. In order for me a small fitness owner I need to have the same hours to be competitive.
Thank you,
Shawn Kerns
608 445-2459

On Thu, Apr 23, 2020, 10:58 AM Lisa McNabola <Lisa.McNabola@fitchburgwi.gov> wrote:

Hi Shawn,

We received the CUP Application for a physical fitness facility. Approximately how many customers will be on site at one time? Can you also explain why the proposed hours of operation are 24/7?

Thanks,

Lisa

Lisa McNabola, Associate Planner

City of Fitchburg | Planning & Zoning

Phone: (608) 270-4256

Email: Lisa.McNabola@fitchburgwi.gov