



AGENCY USE ONLY

Application Number: _____

Received By – Date
(MM/DD/YYYY): _____

CONDOMINIUM INSTRUMENT – APPLICATION FORM

****PLEASE DO NOT COMPLETE THIS APPLICATION FORM UNTIL YOU HAVE READ THE ROCK COUNTY CONDOMINIUM INSTRUMENT – APPLICATION FORM INFORMATION. PLEASE COMPLETE BOTH PAGES OF THIS FORM AND INCLUDE A CONDOMINIUM PLAT (MAP) CONTAINING ALL INFORMATION AS IDENTIFIED ON PAGE 2 OF THIS FORM.****

1. Applicant has contacted the Town, Rock County Planning, Economic & Community Development Agency, and City(s)/Village (if condominium is within Extra-Territorial Plat Approval Jurisdiction (ETJ) area) officials and these parties have determined condominium is feasible: Yes No
2. Condominium is consistent with Town’s Comprehensive Plan – Future Land Use Map: Yes No
3. Condominium area is located in a Farmland Preservation zoning district certified by the State of Wisconsin: Yes No
If you answered **Yes**, proceed to **4**. If you answered **No**, proceed to **5**.
4. Condominium meets Town Base Farm Tract and any other applicable Farmland Preservation zoning district requirement: Yes No
5. Condominium will require a zoning change: Yes No

APPLICANT INFORMATION

6. LANDOWNER OR AUTHORIZED LANDOWNER REPRESENTATIVE

a. Name:				Telephone:		
Address:		City:		State:		Zip:
b. Name:				Telephone:		
Address:		City:		State:		Zip:

7. AGENT (SURVEYOR AND DEVELOPER)

a. Surveyor name:				Telephone:		
Address:		City:		State:		Zip:
b. Developer name:				Telephone:		
Address:		City:		State:		Zip:

8. Identify the individual from **6**. or **7**. that will serve as the primary contact: **6a.** **6b.** **7a.** **7b.**

CONDOMINIUM INFORMATION

9. Condominium name: _____

10. Condominium area location:	Town of	1/4 of	1/4
	Section	Tax parcel number (s) -	

11. Condominium area is located within the Extra-Territorial Plat Approval Jurisdiction (ETJ) Area of a City(s)/Village:
 Yes No If Yes, please identify: **City(s)/Village of** _____

12. Condominium is located adjacent to (check all that apply):
 Local/Town road County highway State highway U.S. highway

13. Landowner’s contiguous property area (Square feet or acres):	14. Condominium area (Square feet or acres):	15. Current zoning of condominium area:
16. Number of new lots created by condominium instrument:	17. Future zoning of new lot(s) created by condominium instrument:	18. Future zoning of parent lot:

19. Covenants or restrictions will be placed on the condominium area: Yes No
If Yes, please identify covenants or restrictions: _____

20. A residential building is currently located in the condominium area: Yes No
If Yes, the building utilizes a: Private onsite wastewater treatment system Public sanitary sewer system

APPLICANT STATEMENT AND SIGNATURE

I, as the undersigned, am a landowner applying for a condominium instrument in unincorporated Rock County, or am serving as the primary contact for said landowner. I do hereby verify that I have reviewed the *ROCK COUNTY CONDOMINIUM INSTRUMENT – APPLICATION FORM INFORMATION*, reviewed and completed this application form, and submitted all information as required per said documents, and that all information is correct, accurate, and true to the best of my knowledge and belief, with all information accessible to me. These statements are being made to induce official action on the part of Rock County, its agents, employees, and officials.

LANDOWNER/PRIMARY CONTACT SIGNATURE: _____	DATE: _____
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APPLICATION CHECKLIST

	Yes	No	Comment
1. Have you included a Condominium Plat (map) clearly marked with the name of the Condominium and the words “ <i>ROCK COUNTY</i> ”, and containing all of the following information?:	<input type="checkbox"/>	<input type="checkbox"/>	
a. A survey of the condominium area in accordance with Sec. 703.11 (2) (b), Wisconsin Statutes:	<input type="checkbox"/>	<input type="checkbox"/>	
b. Approximate location and dimension of all PROPOSED condominium unit(s), numbered for reference, in the condominium area:	<input type="checkbox"/>	<input type="checkbox"/>	
c. Approximate location, dimension (if applicable), and name (if applicable) of all EXISTING/PROPOSED buildings in the condominium area:			
d. Any other information required by the Agency or per Sec. 703.11, Wisconsin Statutes:			
2. Has the Plat been prepared at a convenient scale not to exceed two hundred (200) feet to the inch, with the Plat pages numbered in sequence if more than one (1) page is required, and the total number of Plat pages identified on each page?	<input type="checkbox"/>	<input type="checkbox"/>	
3. Has the Plat been prepared by a land surveyor licensed in Wisconsin and does it contain a Surveyor’s Certificate, per Sec. 703.114 (4) Wisconsin Statutes?	<input type="checkbox"/>	<input type="checkbox"/>	
4. Have you provided all required application form information and has the required party signed the application form?	<input type="checkbox"/>	<input type="checkbox"/>	
5. Have you included a hard copy of this application form and the Plat, an electronic copy of the Plat in a format compatible with the Agency’s Geographic Information System (GIS), and the application fee?	<input type="checkbox"/>	<input type="checkbox"/>	

THANK YOU FOR COMPLETING THE *ROCK COUNTY CONDOMINIUM INSTRUMENT – APPLICATION FORM*.

PLEASE SEND VIA POSTAL MAIL, OR HAND-DELIVER, THIS FORM, A HARD COPY AND ELECTRONIC COPY OF THE CONDOMINIUM PLAT, AND THE APPLICATION FEE, TO:

**ROCK COUNTY PLANNING, ECONOMIC & COMMUNITY DEVELOPMENT AGENCY
51 N. MAIN ST.
JANESVILLE, WI 53545**