

CONDITIONAL USE / SITE PLAN REVIEW APPLICATION

Village of Yorkville, Wisconsin

Owner: THOMAS HRIBAR / HRIBAR LAND MANAGEMENT

Applicant/Agent: THOMAS HRIBAR

Municipality: VILLAGE OF YORKVILLE

Zoning district(s): M-3

TO THE VILLAGE OF YORKVILLE PLAN COMMISSION:

The undersigned requests a conditional use / site plan review permit to (specify use, project, structure, size, etc.)

Construct a 9,999 square foot Industrial Building

AT (site address): 2221 Raymond Avenue

Subdivision: N/A

Lot(s): -

Block: -

Parcel # 194032103002000

Section(s) 03

T03N R21E

If served by municipal sewer, check here: _____

Sanitary permit #: _____

Attached are:

X zoning permit application

X

hearing/review fee (Fees are non-refundable, and re-publication/amendment fees will be charged where applicable.)

X 12 SETS: drawn-to-scale site plan that is based on a survey (10 of the 12 should be sized or folded to 8.5" x 11") letter of agent status

X
X
X

3 SETS: landscaping/lighting plan
12 SETS: report/cover letter and operations plan abutting property owners' names and mailing addresses other

print name: THOMAS HRIBAR

e-mail address: HRIBAR@HRIBARCORP.COM

address: 1821 SE FRONTAGE ROAD
STURTEVANT, WI 53177

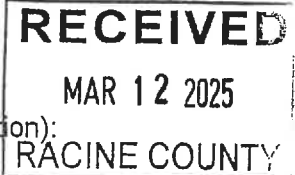
telephone #: (262) 620-6546

signed: Thomas Hribar

STAFF USE ONLY:

BASED ON CURRENT MAPPING, check applicable statement(s) below & underline or circle the word "all" or "partially".

- X The property is all / partially located in the Tributary 2A West Branch Root River Canal shoreland area.
N/A The project is all / partially located in the N/A shoreland area.
X The property is all / partially located in the Tributary 2A West Branch Root River Canal floodplain.
N/A The project is all / partially located in the N/A floodplain.
N/A The property is all / partially located in the wetland.
N/A The project is all / partially located in the wetland.



The applicant is subject to the following Racine County Ordinance provisions (specify article/section):

Article VI Division 29 M-3, Heavy Industrial District

Shoreland contract: yes _____ no X

Public hearing date: April 14, 2025

Site plan review meeting date: N/A

Submittal received by: JSM

Date petition filed: March 12, 2025

cash of (check #) 4748

amount received: \$ 475.00

APPLICATION FOR ZONING PERMIT
RACINE COUNTY, WISCONSIN (Rev. 02/22)

PERMIT NO. _____
 DATE PERMIT ISSUED _____

OWNER HRIBAR LAND MANAGEMENT
 Mailing _____
 Address 1821 SE FRONTAGE ROAD

APPLICANT THOMAS HRIBAR
 Mailing _____
 Address 1821 SE FRONTAGE ROAD

STURTEVANT WI 53177
 City State Zip

STURTEVANT, WI 53177
 City State Zip

Phone (262) 620-6546

Phone (262) 620-6546

Email HRIBAR@HRIBARCORP.COM

Email HRIBAR@HRIBARCORP.COM

Parcel Id. # 194032103002000

Site Address 2221 RAYMOND AVE FRANKSVILLE, WI 531

Municipality Yorkville Section(s) 03 Town 03 North, Range 21 East

Lot - Block - Subdivision Name _____ CSM # -

Proposed Construction/Use Construct a 9,999 sq. ft. Industrial Building

New Addition	<input checked="" type="checkbox"/>	Principal Bldg.	<input checked="" type="checkbox"/>	Size	(<u>66'</u> x <u>151.5'</u>)	(<u>-</u> x <u>-</u>)	(<u>-</u> x <u>-</u>)
Alteration	<input type="checkbox"/>	Accessory	<input type="checkbox"/>	Area (sq ft)	<u>9,999</u>	<u>-</u>	<u>-</u>
Conversion	<input type="checkbox"/>	Deck	<input type="checkbox"/>	Peak Ht. (ft.)	<u>29.66'</u>	100-Yr. Floodplain Elev.	<u>-</u>
Temporary	<input type="checkbox"/>	Sign	<input type="checkbox"/>	Eave Ht. (ft.)	<u>18.66'</u>	Flood Protection Elev.	<u>-</u>
	<input type="checkbox"/>	Other	<input type="checkbox"/>	Building Ht.-Avg. (ft.)	<u>24.16'</u>		

Contractor	Est. Value w/Labor \$	ZONING DISTRICT
Existing Nonconforming? <u>N/A</u>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	<u>M-3</u>
Structure in Shoreland? (per map)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yard Setbacks
Mitigation or Buffer Needed?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Street-1 st
Structure in Floodplain? (per map)	*Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Street-2 nd
*Structure's Fair Market Value \$ <u>N/A</u>	Cumulative %	Side-1 st
*>50% of Fair Market Value? <u>N/A</u>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Side-2 nd
Structure in Wetland? (per map)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Shore
Substandard Lot?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Rear
BOA Variance Needed?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Total Acc. Structures
<u>Conditional Use</u> Site Plan Needed?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Date of Approval
Shoreland Contract Needed?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Date of Approval
Additional Zoning Permit Stipulations Listed on Back of this Form? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (If "Yes," see back)		Date of Approval

The applicant hereby acknowledges receipt of notice contained herein and certifies that submitted information/ attachments are true and correct to the best of the knowledge and belief of the signer, and that all construction/ use will be done in accordance with the Zoning Ordinance, applicable stipulations, and Wisconsin laws.

BOA Conditional Use Site Plan Pd: \$ 475.00
 CC Date/Check#/Cash 4748

Thomas Hribar Signature of Owner /Applicant/Agent Date 3-12-2025

Shoreland Contract Fee Pd: \$ _____
 CC Date/Check#/Cash _____

Thomas Hribar Print Name(s)

Zoning Permit Fee Pd: \$ 1,250.00
 CC Date/Check#/Cash _____

Notes (revisions, extensions, etc.) _____

Other: Pd: \$ _____

RECEIVED
STM
 MAR 12 2025
 (Staff Initials)

Staff Use Only

If a private onsite wastewater treatment system (POWTS) serves the property, check here ___ and complete #1-6 below:

- 1) Sanitary Permit # _____ Date issued _____ Year installed _____ Failing? _____
- 2) If zoning permit is for an accessory structure without plumbing, check here ___ and go to #4 below.
- 3a) If a commercial facility, public building, or place of employment, will there be a change in occupancy of the structure; or will the proposed modification affect either the type or number of plumbing appliances, fixtures or devices discharging to the system? Yes* ___ No ___ N/A ___
- 3b) If a dwelling, will the addition/alteration change the number of bedrooms? Yes* ___ No ___ N/A ___
*If "Yes" above, documentation must be submitted per SPS 383.25 (2) (d) to verify system can be used.
- 4) Will construction interfere with the setback requirements to the POWTS per SPS 383.43 (8) (i)? Yes ___ No ___
If "Yes," provide variance approval date: _____
- 5) Has a new sanitary permit been issued to accommodate the structure or proposed modification in wastewater flow or contaminant load and/or County sanitary approval granted? Yes ___ No ___
- 6) Comments _____

POWTS Inspector's Signature: _____ Date: _____

ZONING PERMIT REQUIREMENTS

A Plat of Survey shall be prepared by a Land Surveyor registered in Wisconsin illustrating new principal structure's location on lots less than five (5) acres in size. All zoning permit applications shall be accompanied by plans drawn to scale, showing the location, actual shape and dimensions of the lot to be built upon and any primary and accessory buildings, the lines within which the building shall be erected, altered or moved, the existing and/or intended use of each building or part of a building and the number of families and/or employees the building is intended to accommodate. Include floodplain, wetlands, environmental corridors, easements and such other information with regard to the lot and neighboring lots or buildings as may be necessary to determine and provide for ordinance enforcement. Adequate driveway access and off-street parking stalls must be provided in accordance with Sec. 20-1088, Racine County Code of Ordinances. In addition, if a private sewage system exists, the location of the tank(s), system and vent shall be shown on the plan with setback distances to the closest part of the proposed construction.

All dimensions shown relating to the location and size of the lot shall be based upon an actual survey. Lot area shall not contain road right-of-way. NOTE: All street yard, side yard, and rear yard setbacks shall be measured from the closest property lines. Shore yard setbacks shall be measured from the closest point of the ordinary highwater mark of a navigable body of water. All elevations shall be provided in mean sea level datum.

All zoning permits issued pursuant to this ordinance are valid for nine (9) months unless substantial construction has commenced and is continuing, otherwise such zoning permits shall become null and void and a new zoning permit is required. It is the responsibility of the applicant to secure all other necessary permits required by any federal, state or local agency. The issuance of a zoning permit is not a guaranty or warranty that the requirements have been met for other necessary permits, or that the site is otherwise suitable for construction.

NOTICE: YOU ARE RESPONSIBLE FOR COMPLYING WITH STATE AND FEDERAL LAWS CONCERNING CONSTRUCTION NEAR OR ON WETLANDS, LAKES, AND STREAMS. WETLANDS THAT ARE NOT ASSOCIATED WITH OPEN WATER CAN BE DIFFICULT TO IDENTIFY. FAILURE TO COMPLY MAY RESULT IN REMOVAL OR MODIFICATION OF CONSTRUCTION THAT VIOLATES THE LAW OR OTHER PENALTIES OR COSTS. FOR MORE INFORMATION, VISIT THE DEPARTMENT OF NATURAL RESOURCES WETLANDS IDENTIFICATION WEB PAGE OR CONTACT A DEPARTMENT OF NATURAL RESOURCES SERVICE CENTER. See DNR web site <http://dnr.wi.gov/wetlands/locating.html> for more information.

ADDITIONAL ZONING PERMIT STIPULATIONS (check all that apply)

- ___ Proposed structure is for owner residential use only and not to be used for human habitation or separate living quarters. No business, commercial or industrial use is allowed.
- ___ All disturbed soils must be reseeded and mulched or sodded immediately upon completion of project.
- ___ Must install the following within 14 days of completion of roof: gutters and downspouts which outlet onto splashblocks or into drain tiles; or a hard surface material that extends at least 16" beyond the dripline of the structure.
- ___ All excess soil not used for backfilling project must be removed from the shoreland area within 10 days of excavation.
- ___ A hard surface material must be placed beneath the deck to prevent soil erosion.
- ___ All existing yard grade elevations will remain unchanged.
- ___ Firmly anchor, no floor < ___'; Buoyant, flammable, explosive or injurious materials/utilities/electric & 1st floor ≥ ___'

CONDITIONAL USE / SITE PLAN REVIEW APPLICATION

Village of Yorkville, Wisconsin

Owner: THOMAS HRIBAR / HRIBAR LAND MANAGEMENT

Applicant/Agent: THOMAS HRIBAR

Municipality: VILLAGE OF YORKVILLE

Zoning district(s): M-3

TO THE VILLAGE OF YORKVILLE PLAN COMMISSION:

The undersigned requests a conditional use / site plan review permit to (specify use, project, structure, size, etc.)

Construct a 9,999 square foot Industrial Building

AT (site address): 2221 Raymond Avenue

Subdivision: N/A

Lot(s): -

Block: -

Parcel # 194032103002000

Section(s) 03

T03N R21E

If served by municipal sewer, check here:

Sanitary permit #:

Attached are:

[X] zoning permit application

[X]

hearing/review fee (Fees are non-refundable, and re-publication/amendment fees will be charged where applicable.)

[X] 12 SETS: drawn-to-scale site plan that is based on a survey (10 of the 12 should be sized or folded to 8.5" x 11") letter of agent status

[X] [X] [X]

3 SETS: landscaping/lighting plan

12 SETS: report/cover letter and operations plan

abutting property owners' names and mailing addresses other

print name: THOMAS HRIBAR

e-mail address: HRIBAR@HRIBARCORP.COM

address: 1821 SE FRONTAGE ROAD

telephone #: (262) 620-6546

STURTEVANT, WI 53177

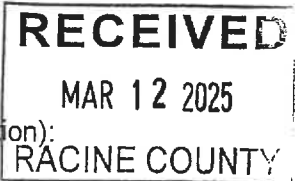
signed:

[Signature]

STAFF USE ONLY:

BASED ON CURRENT MAPPING, check applicable statement(s) below & underline or circle the word "all" or "partially".

- The property is all / partially located in the Tributary 2A West Branch Root River Canal shoreland area.
N/A The project is all / partially located in the N/A shoreland area.
The property is all / partially located in the Tributary 2A West Branch Root River Canal floodplain.
N/A The project is all / partially located in the N/A floodplain.
N/A The property is all / partially located in the wetland.
N/A The project is all / partially located in the wetland.



The applicant is subject to the following Racine County Ordinance provisions (specify article/section):

Article VI Division 29 M-3, Heavy Industrial District

Shoreland contract: yes no [X]

Public hearing date: April 14, 2025

Site plan review meeting date: N/A

Submittal received by: JTM

Date petition filed: March 12, 2025

cash of [X] check # 4748

amount received: \$ 475.00

APPLICATION FOR ZONING PERMIT
RACINE COUNTY, WISCONSIN (Rev. 02/22)

PERMIT NO. _____
 DATE PERMIT ISSUED _____

OWNER HRIBAR LAND MANAGEMENT

APPLICANT THOMAS HRIBAR

Mailing Address 1821 SE FRONTAGE ROAD

Mailing Address 1821 SE FRONTAGE ROAD

STURTEVANT WI 53177
 City State Zip

STURTEVANT, ... WI 53177
 City State Zip

Phone (262) 620-6546

Phone (262) 620-6546

Email HRIBAR@HRIBARCORP.COM

Email HRIBAR@HRIBARCORP.COM

Parcel Id. # 194032103002000

Site Address 2221 RAYMOND AVE FRANKSVILLE, WI 531

Municipality Yorkville Section(s) 03 Town 03 North, Range 21 East

Lot — Block — Subdivision Name _____ CSM # —

Proposed Construction/Use Construct a 9,999 sq. ft. Industrial Building

New Addition	<input checked="" type="checkbox"/>	Principal Bldg.	<input checked="" type="checkbox"/>	Size	(<u>66'</u> x <u>151.5'</u>)	(<u>—</u> x <u>—</u>)	(<u>—</u> x <u>—</u>)
Alteration	<input type="checkbox"/>	Accessory	<input type="checkbox"/>	Area (sq ft)	(<u>9,999</u>)	(<u>—</u>)	(<u>—</u>)
Conversion	<input type="checkbox"/>	Deck	<input type="checkbox"/>	Peak Ht. (ft.)	<u>29.66'</u>	100-Yr. Floodplain Elev.	<u>—</u>
Temporary	<input type="checkbox"/>	Sign	<input type="checkbox"/>	Eave Ht. (ft.)	<u>18.66'</u>	Flood Protection Elev.	<u>—</u>
		Other	<input type="checkbox"/>	Building Ht.-Avg. (ft.)	<u>24.16'</u>		

Contractor	Est. Value w/Labor \$	ZONING DISTRICT
Existing Nonconforming?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> <u>N/A</u>	<u>M-3</u>
Structure in Shoreland? (per map)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yard Setbacks
Mitigation or Buffer Needed?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Street-1 st
Structure in Floodplain? (per map)	*Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Street-2 nd
*Structure's Fair Market Value \$	<u>N/A</u>	Side-1 st
*>50% of Fair Market Value?	<u>N/A</u>	Side-2 nd
Structure in Wetland? (per map)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Shore
Substandard Lot?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Rear
BOA Variance Needed?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Total Acc. Structures
<u>Conditional Use</u> Site Plan Needed?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Date of Approval
Shoreland Contract Needed?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Date of Approval
Additional Zoning Permit Stipulations Listed on Back of this Form?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (If "Yes," see back)	Date of Approval

The applicant hereby acknowledges receipt of notice contained herein and certifies that submitted information/ attachments are true and correct to the best of the knowledge and belief of the signer, and that all construction/ use will be done in accordance with the Zoning Ordinance, applicable stipulations, and Wisconsin laws.

BOA Conditional Use Site Plan Pd: \$ 475.00
 CC Date/Check#/Cash 4748

Thomas Hribar Signature of Owner /Applicant/Agent Date 3-12-2025

Shoreland Contract Fee Pd: \$ _____
 CC Date/Check#/Cash _____

Thomas Hribar Print Name(s)

Zoning Permit Fee Pd: \$ 1,250.00
 CC Date/Check#/Cash _____

Notes (revisions, extensions, etc.) _____

Other: Pd: \$ _____

RECEIVED
STM
 MAR 12 2025
 (Staff Initials)

Staff Use Only

If a private onsite wastewater treatment system (POWTS) serves the property, check here and complete #1-6 below:

- 1) Sanitary Permit # _____ Date issued _____ Year installed _____ Failing? _____
- 2) If zoning permit is for an accessory structure without plumbing, check here and go to #4 below.
- 3a) If a commercial facility, public building, or place of employment, will there be a change in occupancy of the structure; or will the proposed modification affect either the type or number of plumbing appliances, fixtures or devices discharging to the system? Yes* No N/A
- 3b) If a dwelling, will the addition/alteration change the number of bedrooms? Yes* No N/A
*If "Yes" above, documentation must be submitted per SPS 383.25 (2) (d) to verify system can be used.
- 4) Will construction interfere with the setback requirements to the POWTS per SPS 383.43 (8) (i)? Yes No
If "Yes," provide variance approval date: _____
- 5) Has a new sanitary permit been issued to accommodate the structure or proposed modification in wastewater flow or contaminant load and/or County sanitary approval granted? Yes No
- 6) Comments _____

POWTS Inspector's Signature: _____ Date: _____

ZONING PERMIT REQUIREMENTS

A Plat of Survey shall be prepared by a Land Surveyor registered in Wisconsin illustrating new principal structure's location on lots less than five (5) acres in size. All zoning permit applications shall be accompanied by plans drawn to scale, showing the location, actual shape and dimensions of the lot to be built upon and any primary and accessory buildings, the lines within which the building shall be erected, altered or moved, the existing and/or intended use of each building or part of a building and the number of families and/or employees the building is intended to accommodate. Include floodplain, wetlands, environmental corridors, easements and such other information with regard to the lot and neighboring lots or buildings as may be necessary to determine and provide for ordinance enforcement. Adequate driveway access and off-street parking stalls must be provided in accordance with Sec. 20-1088, Racine County Code of Ordinances. In addition, if a private sewage system exists, the location of the tank(s), system and vent shall be shown on the plan with setback distances to the closest part of the proposed construction.

All dimensions shown relating to the location and size of the lot shall be based upon an actual survey. Lot area shall not contain road right-of-way. NOTE: All street yard, side yard, and rear yard setbacks shall be measured from the closest property lines. Shore yard setbacks shall be measured from the closest point of the ordinary highwater mark of a navigable body of water. All elevations shall be provided in mean sea level datum.

All zoning permits issued pursuant to this ordinance are valid for nine (9) months unless substantial construction has commenced and is continuing, otherwise such zoning permits shall become null and void and a new zoning permit is required. It is the responsibility of the applicant to secure all other necessary permits required by any federal, state or local agency. The issuance of a zoning permit is not a guaranty or warranty that the requirements have been met for other necessary permits, or that the site is otherwise suitable for construction.

NOTICE: YOU ARE RESPONSIBLE FOR COMPLYING WITH STATE AND FEDERAL LAWS CONCERNING CONSTRUCTION NEAR OR ON WETLANDS, LAKES, AND STREAMS. WETLANDS THAT ARE NOT ASSOCIATED WITH OPEN WATER CAN BE DIFFICULT TO IDENTIFY. FAILURE TO COMPLY MAY RESULT IN REMOVAL OR MODIFICATION OF CONSTRUCTION THAT VIOLATES THE LAW OR OTHER PENALTIES OR COSTS. FOR MORE INFORMATION, VISIT THE DEPARTMENT OF NATURAL RESOURCES WETLANDS IDENTIFICATION WEB PAGE OR CONTACT A DEPARTMENT OF NATURAL RESOURCES SERVICE CENTER. See DNR web site <http://dnr.wi.gov/wetlands/locating.html> for more information.

ADDITIONAL ZONING PERMIT STIPULATIONS (check all that apply)

- Proposed structure is for owner residential use only and not to be used for human habitation or separate living quarters. No business, commercial or industrial use is allowed.
- All disturbed soils must be reseeded and mulched or sodded immediately upon completion of project.
- Must install the following within 14 days of completion of roof: gutters and downspouts which outlet onto splashblocks or into drain tiles; or a hard surface material that extends at least 16" beyond the dripline of the structure.
- All excess soil not used for backfilling project must be removed from the shoreland area within 10 days of excavation.
- A hard surface material must be placed beneath the deck to prevent soil erosion.
- All existing yard grade elevations will remain unchanged.
- Firmly anchor, no floor < ____'; Buoyant, flammable, explosive or injurious materials/utilities/electric & 1st floor ≥ ____'