



VILLAGE OF TWIN LAKES

105 East Main Street P O Box 1024 Twin Lakes, Wisconsin 53181

Phone (262) 877-2858 Fax (262) 333-3286

VILLAGE BOARD MEETING

Monday, January 15, 2024 – 6:30 p.m.

Village Hall, 105 E. Main Street, Twin Lakes, WI

AGENDA

1. CALL TO ORDER
2. PLEDGE OF ALLEGIANCE
3. ROLL CALL: TRUSTEES ANDRES, BOWER, FITZGERALD, KAROW, KASKIN, PERL, PRESIDENT SKINNER
4. SWEARING IN OF NEW FIRE CHIEF RON REDLIN
5. SWEARING IN OF TWO NEW PATROL OFFICERS
6. APPROVAL OF VOUCHERS FOR PAYMENT: Corporate Checking (including General Fund, Sanitation, Capital Projects-E/M, Sewer Utility, Lake Rehab, Sewer Hook-Up, Sewer Replacement, and Tax Account): 35935-35954, 1447-1429, Payroll Related Checking and State/Federal Tax Wires: 183413-183417 Expenses – \$2,675,315.65
7. PUBLIC COMMENTS AND QUESTIONS: The Village Board will receive comments on agenda items only.
8. PRESIDENT AND TRUSTEE REPORTS
 - A. TRUSTEE SHARON BOWER - ADMINISTRATION, FINANCE, JUDICIARY, LICENSING
 1. Motion to approve an original “Class B/Class “B” Liquor & Fermented Malt Beverage License Application submitted by Aces Sports Bar and Grill Inc, doing business as Aces Sports Bar, 200 E. Main St., Kanwal Singh, Agent.
 2. Consideration of a motion to approve the Short Term Rental applications for:
 - 1209 Lucille / William Dunbar
 - 551 Short St / Kathy Randall
 - 1611 Esch Road / David Appel
 3. Consideration of a motion to approve the Short Term Rental renewal applications for:
 - 1527 Willow Rd, GK Lakehouse LLC / Joseph Kowsky
 - 1308 E. Lakeshore Dr., Stonebreaker Holdings LLC / David Thornton
 - B. TRUSTEE KEVIN FITZGERALD - STREETS & ROADS, EQUIPMENT, STREET LIGHTS, WEEDS, LAKE PLANNING AND PROTECTION
 - C. TRUSTEE BILL KASKIN - CEMETERY, SANITATION, RECYCLING, SENIORS

D. TRUSTEE AARON KAROW - BUILDING AND ZONING, PLAN COMMISSION, AND PUBLIC BUILDINGS

1. December 2023 Building Permits: 14; Valuation: \$3,241,673; Fees Collected: \$11,678.72
2. Discussion and possible action regarding Plan Commission items from the 1/10/24 meeting:
 - a. Motion approve CSM for Parcel #85-4-119-204-3904

E. TRUSTEE KEN PERL - POLICE, FIRE, LAKE CONTROL, PARKS AND BEACHES

F. TRUSTEE BARB ANDRES - SEWER, HEALTH AND ENVIRONMENT, YOUTH, LIBRARY

G. VILLAGE PRESIDENT HOWARD SKINNER

1. Discussion and possible action regarding Resolution 2024-1-1 to Release Drainage Easement in Fairway Woods Subdivision.

9. ADJOURN

MATTERS MAY BE TAKEN IN ORDER OTHER THAN LISTED

Requests from persons with disabilities, who need assistance to participate in this meeting or hearing, should be made to the Clerk Treasurer's office in advance so the appropriate accommodations can be made.

8.)A). 1/2



VILLAGE OF TWIN LAKES

108 East Main Street P O Box 1024 Twin Lakes, Wisconsin 53181
Phone (262) 877-2858 Fax (262) 877-4019

Short-Term Rental Application

License Expires Each Year on December 31

\$150 Annual Fee

Application must be submitted with all other required documents and fees (paid in full) in order to be accepted

Short-Term Rental (STR) Site Information

| | |
|--|--|
| Address: 1209 Lucille Ave. Twin Lake, Wisconsin 53181 | Parcel ID No.: 86-4-119-294-3105 |
| Maximum Capacity: 6 | Tourist Rooming House License No.*: KKEG-CV6LL3 |
| FEIN No.: [REDACTED] | WI Seller's Permit No.*: [REDACTED] |

**Copies of permits/licenses must be included with application*

Owner Information

| | | |
|-------------------------|--|-------------------|
| Name: William Dunbar | Address: 1210 Lucille Ave. Twin Lake, Wisconsin 53181 | |
| Phone: [REDACTED] | Date of Birth: [REDACTED] | Email: [REDACTED] |

Will the owner of the property serve as Property Manager? YES NO**

***If no, complete Property Manager Information section below*

Property Manager Information (If not Owner)

| | | |
|--------|----------------|--------|
| Name: | Address: | |
| Phone: | Date of Birth: | Email: |

Maximum Occupancy for Premise 6
(Total number of occupants licensed by the State of Wisconsin or the jurisdiction in which the property is located, whichever is less)

1209 Lucille Ave Date to PD 10/17 Pass/Fail Pass
Outstanding Fines/Forfeitures? 0 10/24/23 AMW 10/31
PD Chief Signature: K. W. K. M. Date: 10/31/23

Items to Submit with Application

- Application Fee of \$150
- State of Wisconsin Tourism Rooming House License
- Seller's Permit issued by the Department of Revenue, if any
- Floor Plan of the Tourist Rooming House and Site Plan of property
- Property Manager Agreement (if applicable)

1209 Lucille Ave
FIRE INSPECTION DATE: 11-9-23 REC 11/9
PASS? Pass SIGNATURE: Benedict Amerec
Building Inspection Date 11/14/24 Date to BI 10/17
Pass/Fail? Pass Signature: [Signature] REC 1/11

I certify that I have read the foregoing answers and the same are true to the best of my knowledge. I understand that any short-term rental license shall comply with all provisions of Village of Twin Lakes Code Chapter 5.40, and I hereby certify the property meets those requirements and I will comply with those requirements. I hereby additionally designate the Property Manager, if any, as an agent for the purpose of accepting service of process in any civil action arising out of or in conjunction with the use of this license. I understand and shall comply with all provisions of Village of Twin Lakes Code Chapter 5.20.120(e) stating no license shall be issued to any person who shall owe any taxes to the State of Wisconsin or owe any taxes, fines or forfeitures to the Village. I understand and shall comply with the provision that the Village will conduct a Building Inspection and Fire Inspection. If the property were to fail the Building and/or Fire Inspections, I understand and shall comply with making any modifications the Building Inspector and Fire Inspector recommend along with a \$65 re-inspection fee.

Owner Signature: [Signature] Date: 10-06-2023

Remit application, fees and all other required documents to the Clerk's Office

Completed 1/11

First Floor Plan 1209 Lucille Ave. Twin Lakes, WI 53181

Porch Stairs
4'Wx3'D

EXIST

Back Porch
18'Wx8.25D

EXIT

Bathroom w/
Shower and Tub
9.5'Wx7.5D

Back Porch
6'Wx6'D

Hallway 1/2 Bathroom
5.5'Wx5.5'D

Outside Stairs to the Basement
7'Wx3'D

Open Concept
Kitchen and Dining Room
11.5'Wx27.25'D

Railing

Bedroom #2
9'Wx9'D

Sunken Living Room
11.25'Wx17'D

Stairs to the Living Room
4.5'Wx3'D

Railing

Bedroom #1
9'Wx11.25'D

Stairs to the 2nd Floor
10'Wx3.5D

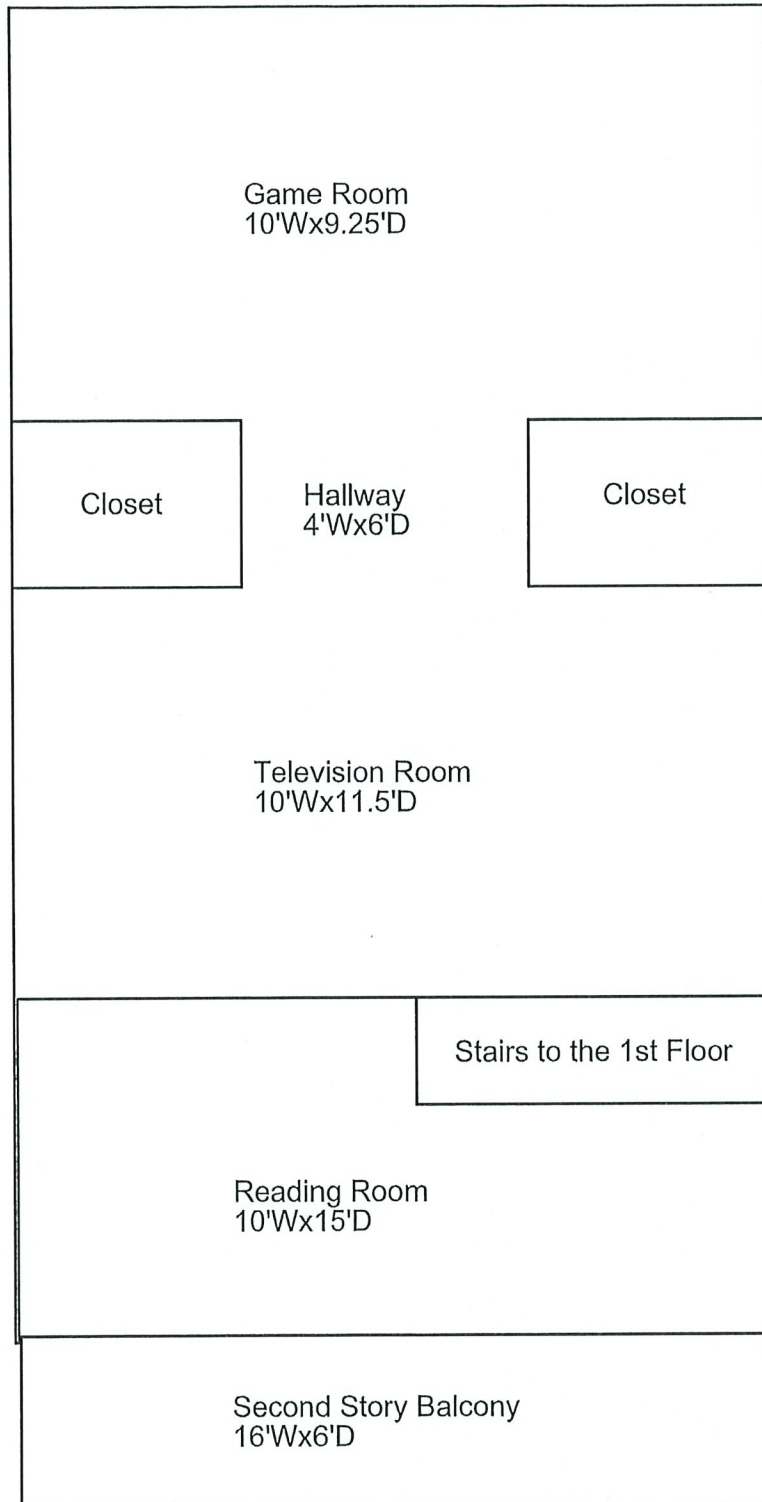
Inside Porch Area
21.25'Wx9.5'D

EXIT

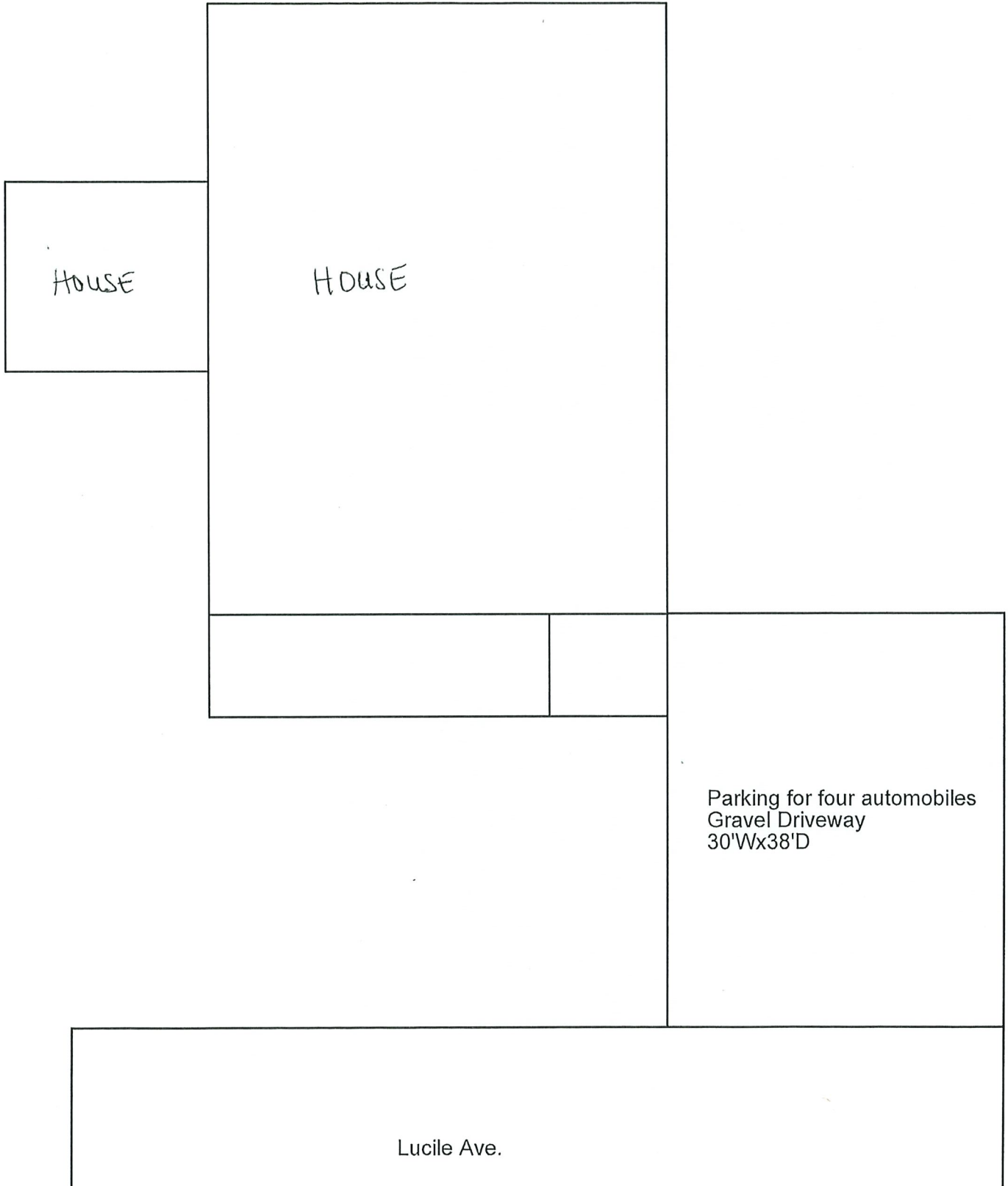
Front Outside Deck Street Side
13.5'Wx8.2'D

Stairs to the
Ground Level
6'Wx4'D

Second Story 1209 Lucille Ave. Twin Lakes, WI 53181



1209 Lucille Ave. Twin Lake, Wisconsin 53181 Parking





KENOSHA COUNTY PUBLIC HEALTH

License, Permit or Registration

The person, firm, or corporation whose name appears on this certificate has complied with the provisions of the Wisconsin statutes and is here by authorized to engage in the activity as indicated below.

| | | |
|---|--------------------------------|---|
| ACTIVITY Tourist Rooming House (LTR) | EXPIRATION DATE 30-Jun-2024 | I.D. NUMBER KKEG-CV6LL3 |
| LICENSEE MAILING ADDRESS WILLIAM DUNBAR 1210 LUCILLE AVE TWIN LAKES WI 53181 | NOT TRANSFERABLE | BUSINESS / ESTABLISHMENT ADDRESS VACATION BY THE LAKE 1209 LUCILLE AVE TWIN LAKES WI 53181 |

All Permits expire on June 30th; it is the responsibility of the licensee to make sure all applicable fees are received by the department before July 1st or a late payment fee will be assessed.

If you do not receive a renewal form prior to June 30th from your licensing authority, you should send in your payment for renewing your permit to the following address:

KENOSHA COUNTY PUBLIC HEALTH
8600 SHERIDAN RD SUITE 600
KENOSHA, WI 53143-6515
(262)605-6700

* Include the name of your facility and the ID number.



VILLAGE OF TWIN LAKES

105 East Main St, PO Box 1024 Twin Lakes, WI 53181
Phone (262) 877-2858 Fax (262) 333-3286

Short Term Rental Application

Licenses Expires on December 31st

[X] New Application [] Renewal

Application must be filled out completely and include the following items:

- [X] Completed Village of Twin Lakes Short Term Rental Application with \$150.00 Fee. Issued for a 1-year period, from January 1st to December 31st. No proration for partial year.
[X] State of Wisconsin Tourist Rooming House License as required by Wis Stat 66 1014(2)(d)2 a issued by the Wisconsin Department of Agriculture, Trade, and Consumer Protection or agent thereof, Kenosha County Public Health. State of Wisconsin Seller's Permit issued by the Department of Revenue or AirBNB / VRBO Contract
[X] Floor Plan showing bedrooms, doors, fire exits and available parking (see example) Property
[X] Manager Agreement (if applicable)

Property Address: 551 Short Street Twin Lakes Parcel Number: 85-4-119-212-1610

Maximum Occupancy for premise:

Contracted with a 3rd Party? [X] Yes [] No (i.e. Airbnb/VRBO)

(The total number of occupants licensed by the State of Wisconsin or two per bedroom plus two additional occupants, whichever is less)

Company Name: Evolve Property Management

Table with 2 columns: Property Owner Information and Property Manager Information. Rows include Name, Physical Address, State, Zip, Mailing Address, and Phone/Email.

Building Inspection Date 12/19/23

Pass/Fail? Pass Signature [Signature]

Date to Bill 11/17 State entity? If yes, attach property manager agreement. [] Yes [] No

I understand and know the same to be true and correct. I understand and shall comply with all provisions of Village of Twin Lakes Code Chapter 5.40.020(c)(9)...

Owner Signature [Signature]

Date 11-13-23

Date to PD 11/17 Pass/Fail [Signature]

11-13-23

Outstanding Fines/Forfeitures? [Signature]

PD Chief Signature: [Signature] Date: 11/29/23

Revision Date: Sept 2023

Fire Inspection Date 11-18-2023

Pass/Fail? Pass Signature [Signature]

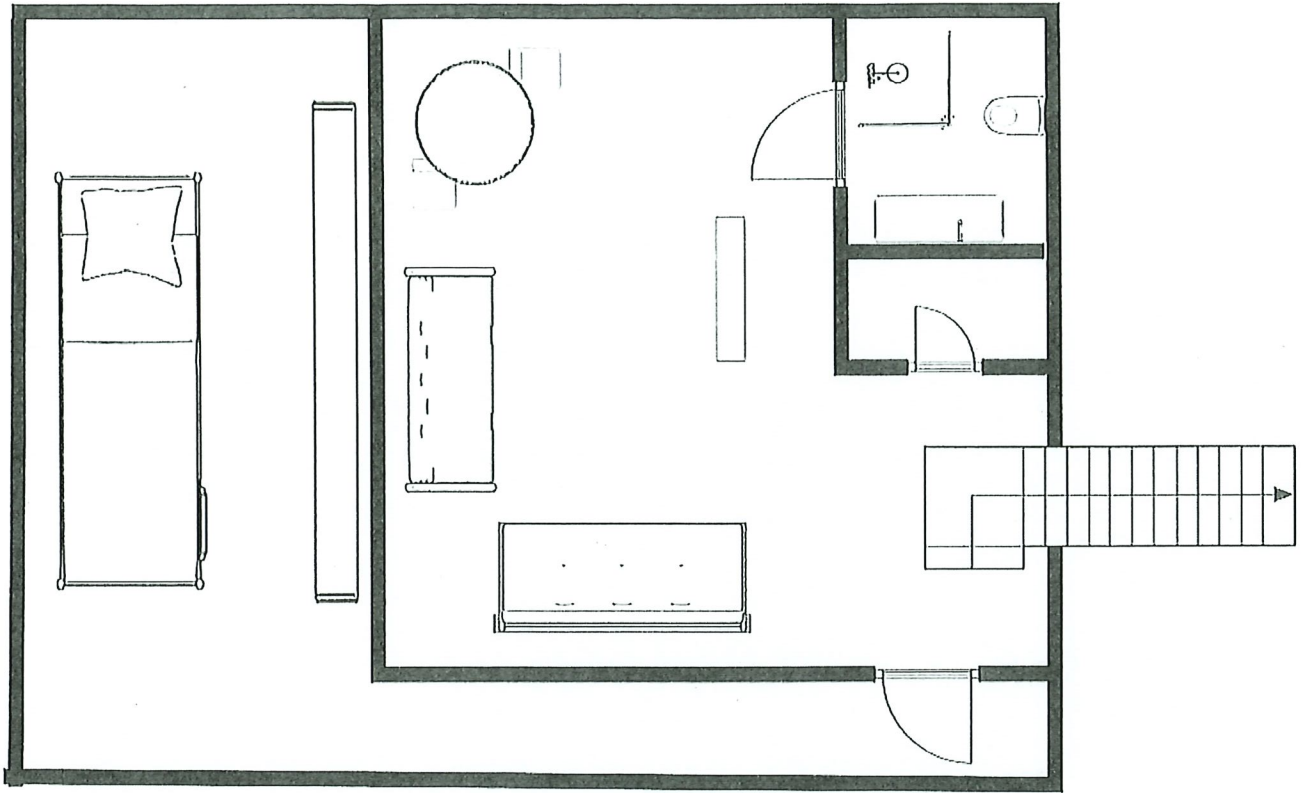
- Rec 11/18

Completed JAN 11th

551 Short Street



551 Short Street





Kathy Randall [Redacted]

Camp Kenny

2 messages

Adam Barningham <[Redacted]> Thu, Oct 12, 2023 at 3:09 PM
To: Kathy Randall [Redacted]
Cc: Steve Kenny [Redacted]

To Whom It May Concern,

This email is meant to inform you that Kathy Randall and Steve Kenny have met all of the licensing requirements for tourist rooming houses through the Kenosha County Division of Health. Their tourist rooming house located at 551 Short St. Twin Lakes, WI is approved to operate per KCDOH. The license should be processed within the next week or so. Please do not hesitate to contact me with any questions or concerns. My contact information can be found below.

Best,

Adam Barningham | Environmental Health Technician | He/Him/His

Kenosha County Public Health 8600 Sheridan Road, Kenosha, WI 53143

Office: 262.605.6746 | Cell: 262.237.2308 | [Redacted] | Facebook

Vision: An Equitable, Engaged, & Healthy Future



Kathy Randall <[Redacted]> Thu, Oct 12, 2023 at 3:37 PM
To: Adam Barningham [Redacted]
Cc: Steve Kenny [Redacted]

Thanks Adam. You've been great to work with during this process. I appreciate your help and responsiveness.

Kathy Randall
[Redacted]

[Quoted text hidden]



VILLAGE OF TWIN LAKES

105 East Main St. PO Box 1024 Twin Lakes, WI 53181
Phone (262) 877-2858 Fax (262) 333-3286

Short Term Rental Application

Licenses Expires on December 31st

New Application Renewal

Application must be filled out completely and include the following items:

- Completed Village of Twin Lakes Short Term Rental Application with \$150.00 Fee. Issued for a 1-year period, from January 1st to December 31st. No proration for partial year.
- State of Wisconsin Tourist Rooming House License as required by Wis. Stat. 66.1014(2)(d)2.a. issued by the Wisconsin Department of Agriculture, Trade, and Consumer Protection or agent thereof, Kenosha County Public Health. State of Wisconsin Seller's Permit issued by the Department of Revenue or AirBNB / VRBO Contract
- Floor Plan showing bedrooms, doors, fire exits and available parking (see example) Property
- Manager Agreement (if applicable)

Property Address: 1611 Esch Road Twin Lakes WI. 53181 Parcel Number: 86-4-19-323-2510

Maximum Occupancy for premise:

Contracted with a 3rd Party? Yes No

(The total number of occupants licensed by the State of Wisconsin or two per bedroom plus two additional occupants, whichever is less)

(i.e. Airbnb/VRBO)

Company Name: PENDING

| Property Owner Information | Property Manager Information |
|---|------------------------------|
| Name <u>DAVID + MIRIAM Appel</u> | Name <u>SAME</u> |
| Physical Address <u>5220 N. LATROBE Chicago IL.</u> | Physical Address |
| State, Zip <u>IL. 60630</u> | State Zip |
| Mailing Address <u>5220 N. LATROBE Chicago</u> | Mailing Address |
| State, Zip <u>IL. 60630</u> | State Zip |
| Phone <u>[REDACTED]</u> | Phone |
| Email <u>[REDACTED]</u> | Email |

Is this property managed by a 3rd party corporate entity? If yes, attach property manager agreement. Yes No

I hereby certify that I have answered all the questions contained herein and know the same to be true and correct. I understand and shall comply with all

Inspection Date 12/12/23 Building Inspection Date 1-3-24 Date to Bill 12/14

Pass/Fail? Fail Signature [Signature] Pass/Fail? PASS Signature [Signature]

Inspector and Fire Inspector recommend along with a \$65 re-inspection fee. I understand and shall notify the Village within 24 hours should there be a change in contact information pursuant to Village of Twin Lakes Code Chapter 5.40.020(c)(9).

Owner Signature [Signature] Date 5 DECEMBER 23

Date to PD 12/14 Pass/Fail P

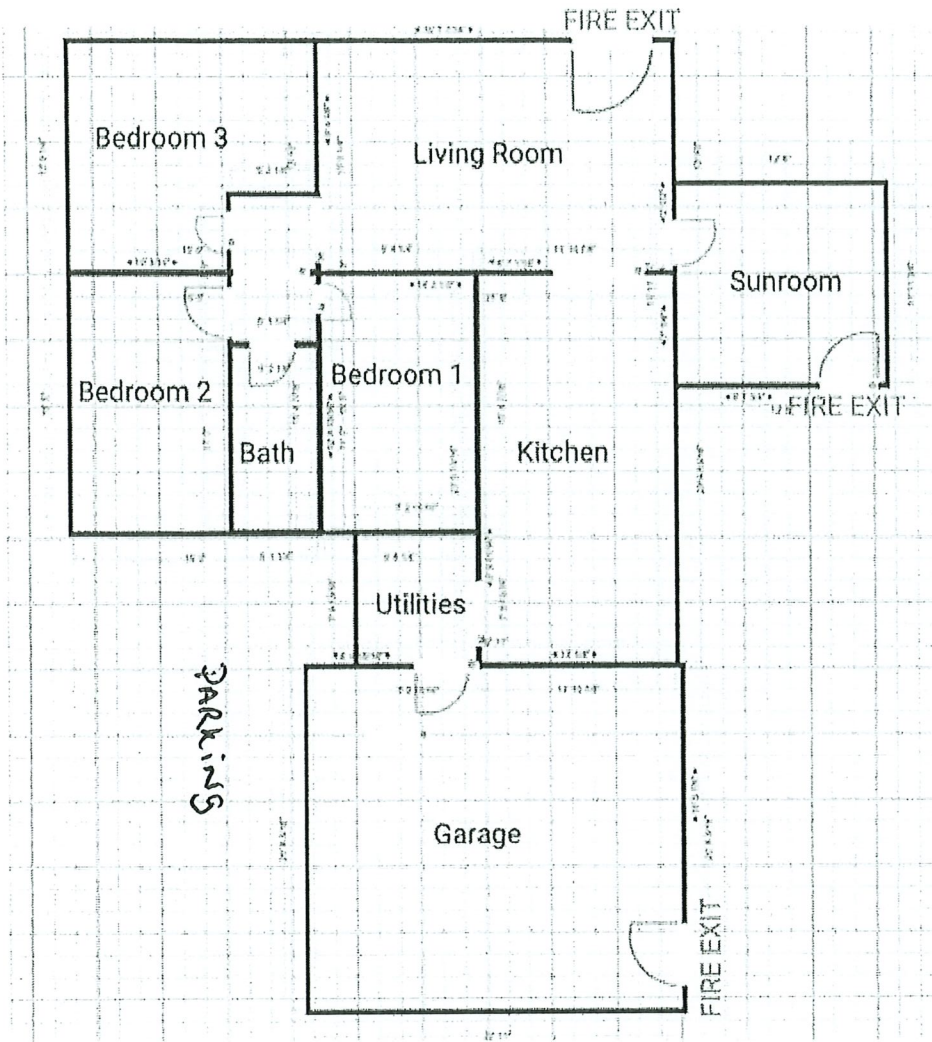
Outstanding Fines/Forfeitures? 0

PD Chief Signature: [Signature] Date: 12/14/23

Fire Inspection Date 12-11-2023 Date: Sept 2023

Pass/Fail? PASS Signature [Signature] Complete 1/11

1611 Esch Road, Twin Lakes, WI Fire Exits





Lodging Inspection Report

| Establishment Information | |
|--|--|
| Facility Name 1818 LLC | Facility Type Tourist Rooming House (LTR) |
| Facility ID # ABAM-CY2QVT | Facility Telephone # 262 |
| Facility Address 1611 ESCH RD TWIN LAKES, WI 53181 | |
| Licensee Name 1818 LLC | Licensee Address 5220 N LATROBE CHICAGO, IL 60630 |

| Inspection Information | | |
|-----------------------------------|-------------------------------------|--------------------------|
| Inspection Type Pre-inspection | Inspection Date December 4, 2023 | Total Time Spent 0.50 |

OPERATOR - The violations in operating procedure or physical arrangement indicated below must be corrected by the next routine inspection or by a date specified in this report.

Comments:

No violations noted. Approved to operate per KCDOH. Please comply with all local ordinances and obtain any necessary permits. Signatures attached on hard copy report. Discussed the process of scheduling annual inspections. Informed the owner that an employee would contact him to schedule the annual inspections on a yearly basis. Water results in note to file.

Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in ch.227 statute, if state licensed, or a local ordinance if licensed by an agent health department.

Person in Charge

Sanitarian

Adam Barningham
(262) 605-6746



VILLAGE OF TWIN LAKES

105 East Main St. PO Box 1024 Twin Lakes, WI 53181
Phone (262) 877-2858 Fax (262) 333-3286

Short Term Rental Application

Licenses Expires on December 31st

New Application Renewal

Application must be filled out completely and include the following items:

- Completed Village of Twin Lakes Short Term Rental Application with \$150.00 Fee. Issued for a 1-year period, from January 1st to December 31st. No proration for partial year.
- State of Wisconsin Tourist Rooming House License as required by Wis. Stat. 66.1014(2)(d)2.a. Issued by the Wisconsin Department of Agriculture, Trade, and Consumer Protection or agent thereof, Kenosha County Public Health. State of Wisconsin Seller's Permit issued by the Department of Revenue or AirBNB / VRBO Contract
- Floor Plan showing bedrooms, doors, fire exits and available parking (see example) Property
- Manager Agreement (if applicable) N/A

Property Address: 1527 Willow Rd Parcel Number: 86-4-119-323-2320

Maximum Occupancy for premise: 8 Contracted with a 3rd Party? Yes No

(The total number of occupants licensed by the State of Wisconsin or two per bedroom plus two additional occupants, whichever is less) (i.e. Airbnb/VRBO)
Company Name: GK Lakehouse LLC

| Property Owner Information | Property Manager Information |
|--|------------------------------|
| Name <u>Joc Kowsky</u> | Name <u>N/A</u> |
| Physical Address <u>W183 N9020 Amy Ln</u> | Physical Address <u>N/A</u> |
| State, Zip <u>Menomonie Falls, WI, 53051</u> | State Zip <u>N/A</u> |
| Mailing Address <u>same as</u> | Mailing Address <u>N/A</u> |
| State, Zip | State Zip <u>N/A</u> |
| Phone | Phone <u>N/A</u> |
| Email | Email <u>N/A</u> |

Is this property managed by a 3rd party corporate entity? If yes, attach property manager agreement. Yes No

I certify the property meets those requirements. I understand and shall comply with all no license shall be issued to any person who owes any taxes to the State of Wisconsin or shall comply with the provision that the Village will conduct a Building Inspection and Fire Inspection. I understand and shall comply with making any modifications the Building Inspector and Fire Inspector recommend along with a \$65 re-inspection fee. I understand and shall notify the Village within 24 hours should there be a change in contact information pursuant to Village of Twin Lakes Code Chapter 5.40.020(c)(9).

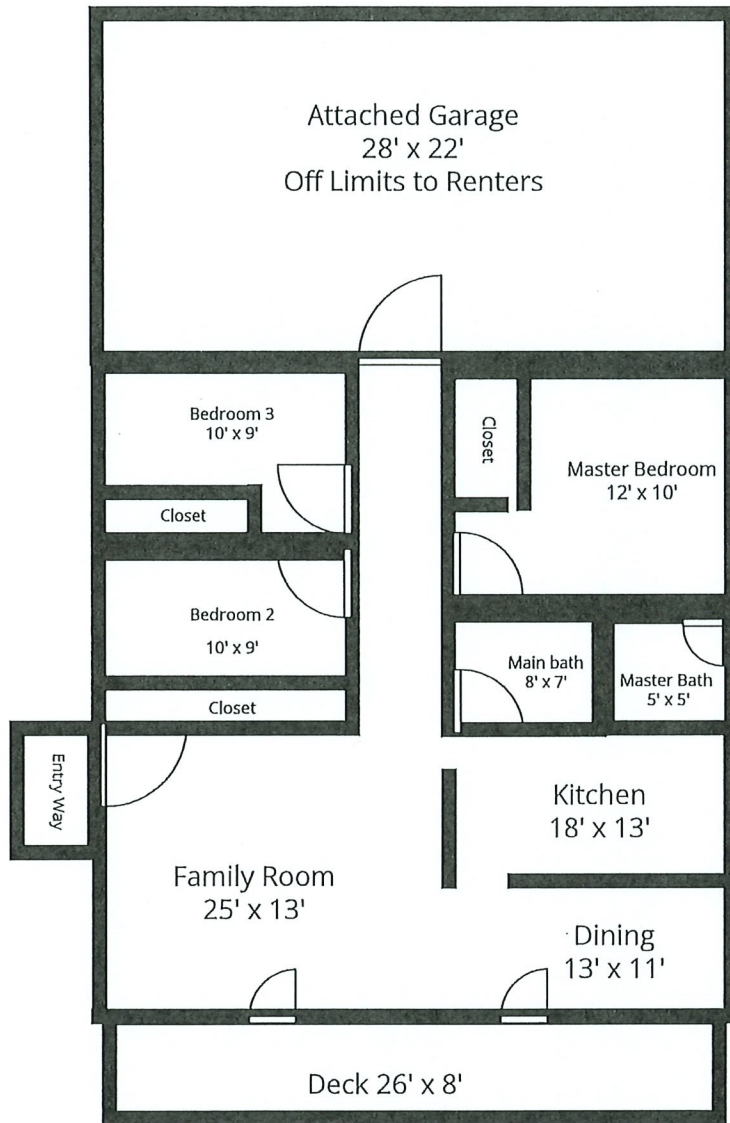
Building Inspection Date 1/11/24 Date to Bill 10/26
Pass/Fail? Pass Signature [Signature]

Owner Signature [Signature] Date 10-22-2023

Date to PD 10/26 Pass/Fail Pass
Outstanding Fines/Forfeitures? 0
PD Chief Signature: [Signature] Date: 11/7/23

Fire Inspection Date 11-7-23 Complete 1/11
Pass/Fail? Pass Signature [Signature]

Driveway Parking





KENOSHA COUNTY PUBLIC HEALTH

License, Permit or Registration

The person, firm, or corporation whose name appears on this certificate has complied with the provisions of the Wisconsin statutes and is hereby authorized to engage in the activity as indicated below.

| | | |
|---|--------------------------------|--|
| ACTIVITY Tourist Rooming House (LTR) | EXPIRATION DATE 30-Jun-2024 | ID NUMBER MMEK-C6NQ4Y |
| LICENSEE MAILING ADDRESS GK LAKE HOUSE LLC W183N9020 AMY LN MENOMONEE FALLS WI 53051 | NOT TRANSFERABLE | BUSINESS / ESTABLISHMENT ADDRESS GK LAKE HOUSE LLC 1527 WILLOW RD TWIN LAKES WI 53181 |

All Permits expire on June 30th; it is the responsibility of the licensee to make sure all applicable fees are received by the department before July 1st or a late payment fee will be assessed.

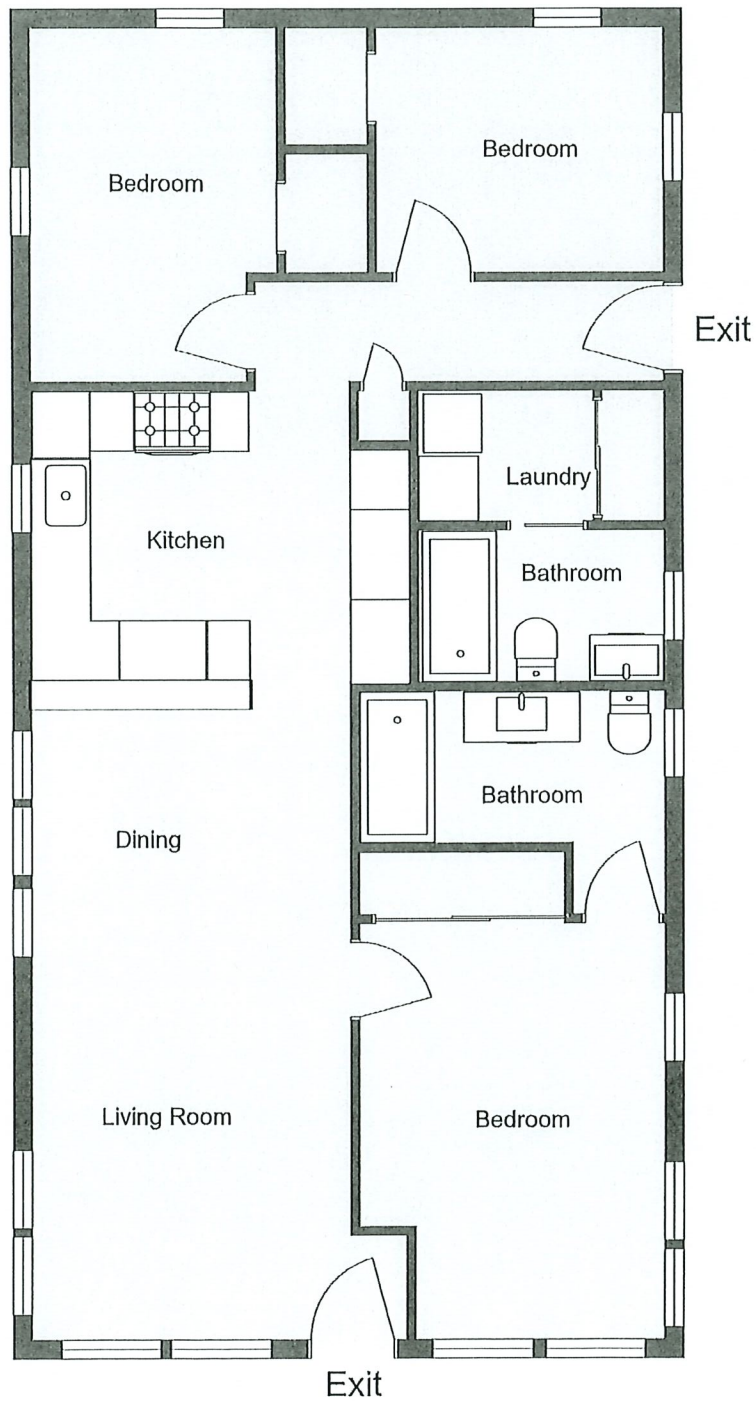
If you do not receive a renewal form prior to June 30th from your licensing authority, you should send in your payment for renewing your permit to the following address:

KENOSHA COUNTY PUBLIC HEALTH
8600 SHERIDAN RD SUITE 600
KENOSHA, WI 53143-6515
(262)605-6700

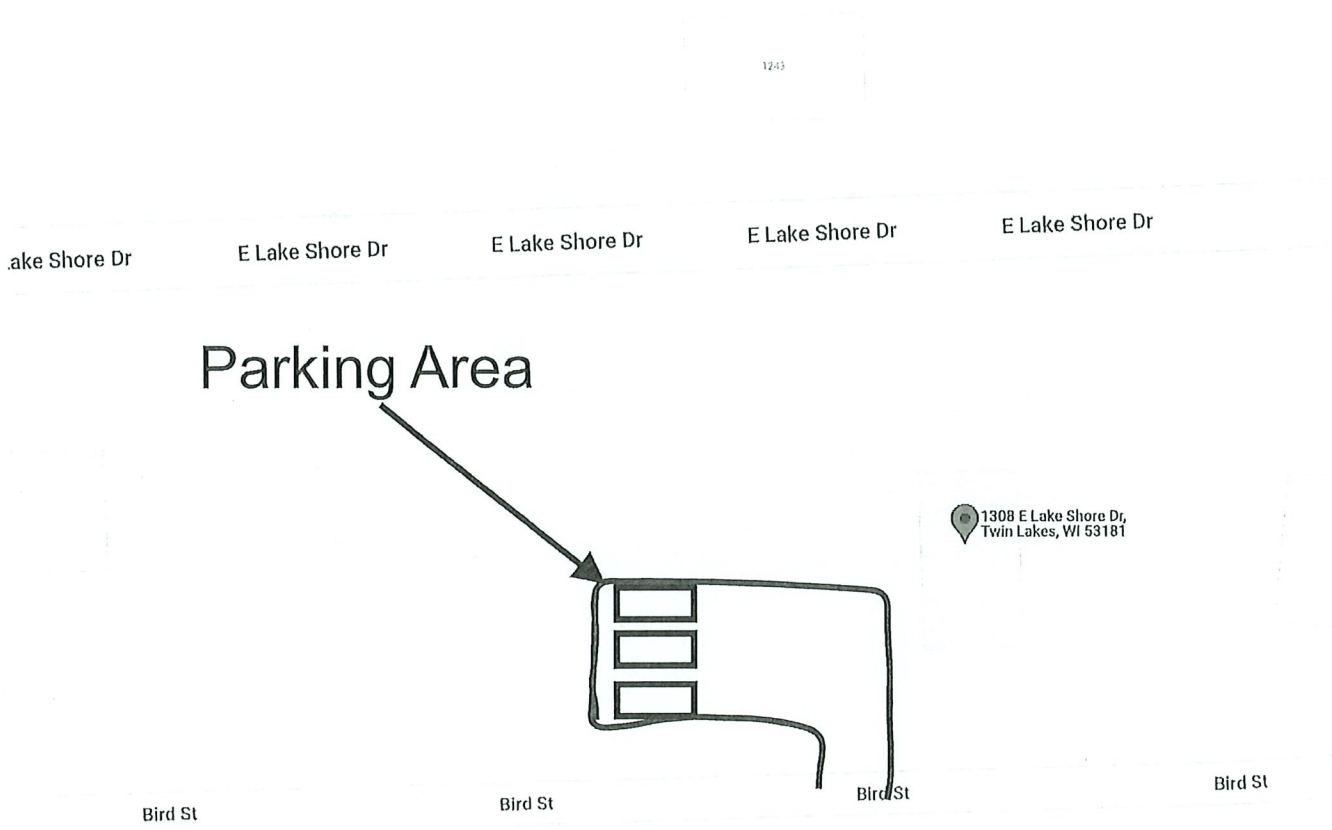
* Include the name of your facility and the ID number.

F-18-123

1308 East Lakeshore Drive
1. Floor
1308 East Lakeshore Drive
Twin Lakes, WI 53181



Google Maps 1308 E Lake Shore Dr
Parking Plan



Google

Map data ©2022 20 ft

1308 E Lakeshore DR

KENOSHA COUNTY PUBLIC HEALTH

License, Permit or Registration

The person, firm, or corporation whose name appears on this certificate has complied with the provisions of the Wisconsin statutes and is here by authorized to engage in the activity as indicated below.

| ACTIVITY | EXPIRATION DATE | ID. NUMBER |
|-----------------------------|----------------------------------|--------------|
| Tourist Rooming House (LTR) | 30-Jun-2024 | MMEK-C670-W6 |
| LICENSEE MAILING ADDRESS | BUSINESS / ESTABLISHMENT ADDRESS | |
| STONEBREAKER HOLDINGS LLC | STONEBREAKER HOLDINGS LLC | |
| 1412 OAK ST | 1308 E LAKESHORE DR | |
| TWIN LAKES WI 53181 | TWIN LAKES WI 53181 | |



Department of Building and Zoning
Subdivision Request
Application and Checklists

Please Print Clearly:
Legal Property Owner:

Name: TWIN LAKES STORAGE LLC.
Mailing Address: N 3445 COMO ROAD
LAKE GENEVA WI 53147
City State Zip

Applicant/Petitioner:

Name: ERWIN HINTZ
Mailing Address: N 3445 COMO ROAD
LAKE GENEVA WI 53147
City State Zip

Telephone #: 847 338 8990
(Area Code)

Fax Number: _____

E-Mail Address: STOREITNOW@OUTLOOK.COM

Property Information

Property Address: CSM 2676 LOT 2 LANCE DRIVE
TWIN LAKES WI 53147
City State Zip

Parcel Number: 85-4-119-204-3904

General Project Location: JUST WEST OF POLICE STATION

Proposed Project Use: COMMERCIAL LOTS

Current Use: AGRICULTURE

Existing Zoning: COMMERCIAL

Mets & Bounds
Legal Description: _____
(More space is available on the next page)

Review & Approval Checklists

1.) Please select the request for which you are applying:

Minor Land Division (4 parcels or less)

Major Land Division* (5 or more parcels)

*May require development agreement

2.) Are you requesting zoning changes? ** Yes No

If yes, fill in the fields immediately below:

Current Zoning: _____

Proposed Zoning: _____

** Zoning change requests are \$325

3.) Pre-Application Conference

Prior to applying for approval, schedule a meeting with the Village Building Inspector. This initial review meeting is intended to inform you about the Village Code and the Comprehensive Plan, to review standards, and to identify any potential issues. The Building Inspector can be reached at 262.877.3700 or Inspector@twlakeswi.net. You must first meet with the Building Inspector and submit your Concept Plan *before* you can submit a C.S.M. In some cases, only the Building Inspector needs to review and approve your C.S.M. See the Village Code 16.70.015 for situations that require only Building Inspector approval. For all other cases, the C.S.M. will need to be submitted to the Village Board for approval. Details regarding this procedure can be found in the Village Code 16.12.090 and 16.70.060

4.) Required Submittals

Submit the following plans and materials to the Building Inspector for approval. The Building Inspector's approval must be obtained at least 30 days prior to the next scheduled Plan Commission meeting. Plan Commission/Design Review meets the fourth Wednesday of each month at 6:30PM at the Village Hall, 108 E. Main Street, unless rescheduling is needed due to availability. Review will not commence until all of the following have been submitted:

Next Plan Commission Date: _____

| Minor Land Division Submittals | Major Land Division Submittals |
|--|---|
| <p>* Concept Plan (see checklist in section 6)</p> <p>*19 copies of a C.S.M. that has been prepared by a Wisconsin licensed surveyor. Anything larger than letter-sized paper will have to be folded for mailing purposes.</p> <ul style="list-style-type: none"> ~ Review required information for the C.S.M. found in the Village Code: 16.70.090 and 16.70.020 ~ Must include all contiguous land ~ You may be required to delineate primary and secondary environmental corridors and wetlands and stake them as well. Please contact the zoning administrator to verify. <p>* Check payable to Village of Twin Lakes (see fee schedule in section 5)</p> | <p>* Concept Plan, Preliminary & Final (see checklist in section 6)</p> <p>*19 copies of a C.S.M. that has been prepared by a Wisconsin licensed surveyor. Anything larger than letter-sized paper will have to be folded for mailing purposes.</p> <ul style="list-style-type: none"> ~ Review required information for the C.S.M. found in the Village Code: 16.70.090 and 16.70.020 ~ Must include all contiguous land ~ You may be required to delineate primary and secondary environmental corridors and wetlands and stake them as well. Please contact the zoning administrator to verify. <p>* Developer's Agreement</p> <ul style="list-style-type: none"> ~ Covenants, if applicable ~ Condo documentation, if applicable <p>* Check payable to Village of Twin Lakes (see fee schedule in section 5)</p> |

Village staff may determine that an escrow account is to be set up with the Village Treasurer to cover attorney, engineer or planner fees. Applicant/petitioner is hereby duly advised that the engineer and/or attorney or any professional assistance as deemed necessary by the Village of Twin Lakes may be employed for this project, issue, or matter. Escrow money required from the applicant will be put into an account for use in the payment of any professional fees and any balance will be returned within 45 days after the matter is completed.

To accompany this application: \$250.00 fee for Plan Commission/Design Review appearance, additional fees and escrow money as noted on the next page, and all completed paperwork.

Owner's Name (please print): ERWIN HENTZ

Owner's Signature: [Signature] Date _____

Applicant/Petitioner's Name (please print): _____

Applicant/Petitioner's Signature: _____ Date _____

5.) Required Fees

Plan Commission/Design Review Appearance Fee (Village Code 3.06.010 (D), 1 & 2): \$ 250.00

Zoning Change Request Fee, \$325 if applicable (Municipal Code 17.44.050): \$ _____

Escrow, as required by Village Administrator and/or Building Inspector: \$ _____

Total Amount Due: \$ _____

Developer's Agreement Required? Yes _____ No _____

Checks shall be made payable to Village of Twin Lakes

6.) Concept Plan Checklist (continued on next page)

- Name, address, and telephone number of developer, engineer, and architect
- Existing and proposed zoning districts and land uses
- Plan must be drawn to a recognized engineering scale with graphic scale and north arrow
- Neighborhood sketch plan (if required, consult with Building Inspector regarding your specific project)
- Pattern of existing and probable future development of the area in question
- How the proposed development will relate to the surrounding area
- Conceptual building layouts and parking areas for all uses (other than single-family residential development)
- If available, artist renderings of structures and facilities and floor plans (other than single-family residential development)
- Identify existing and proposed zoning districts and land uses
- Proposed conceptual landscaping (other than single-family residential development)
- Access and internal traffic movement
- Topographic contours at two-foot intervals
- Existing and proposed public and private street layout pattern and all existing and proposed roads to be named (cannot be similar to existing road names)
- Lot or parcel layout, existing and proposed; including areas and dimensions for each
- Number of dwelling units per acre

- Lands reserved or dedicated for streets, parks, playgrounds, and other public purposes
- Existing and proposed sanitary and stormwater management, utility and drainage ensemments, and erosion/sediment control
- Significant environmental features including navigable waters, wetlands, floodlands, and woodlands
- Vicinity sketch showing adjacent subdivisions and boundaries of unsubdivided land

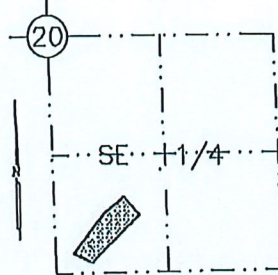
KENOSHA COUNTY CERTIFIED SURVEY MAP NO. _____

Village Of Twin Lakes Certified Survey Map No. _____

BEING A DIVISION OF LOT 2 OF KENOSHA COUNTY CERTIFIED SURVEY MAP NO. 2676, RECORDED AS DOCUMENT NO. 1629015, LOCATED IN THE SOUTHWEST 1/4 OF THE SOUTHEAST 1/4 OF SECTION 20, TOWN 1 NORTH, RANGE 19 EAST OF THE FOURTH PRINCIPAL MERIDIAN, VILLAGE OF TWIN LAKES, KENOSHA COUNTY, WISCONSIN.

OWNERS/SUBDIVIDERS:

ERWIN HINTZ & MARY J. HINTZ
TWIN LAKES STORAGE LLC
N3445 COMO ROAD
LAKE GENEVA, WI 53147



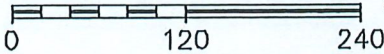
VICINITY MAP

SE 1/4 SEC. 20-1-19
SCALE: 1" = 2000'

CENTER OF SECTION 20-1-19
N. 198,382.90
E. 2,464,814.44

SCALE: 1" = 120'

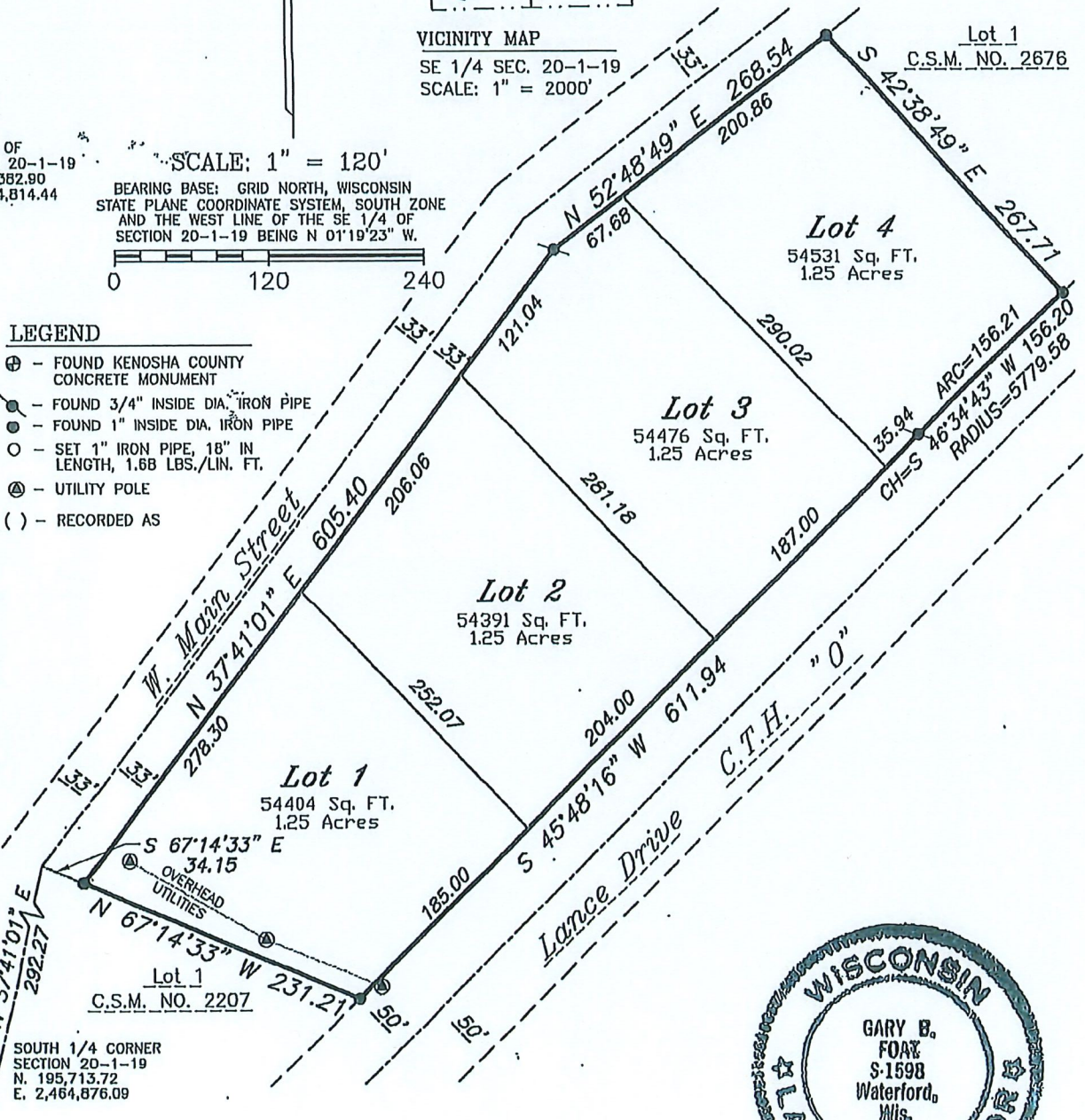
BEARING BASE: GRID NORTH, WISCONSIN STATE PLANE COORDINATE SYSTEM, SOUTH ZONE AND THE WEST LINE OF THE SE 1/4 OF SECTION 20-1-19 BEING N 01°19'23" W.



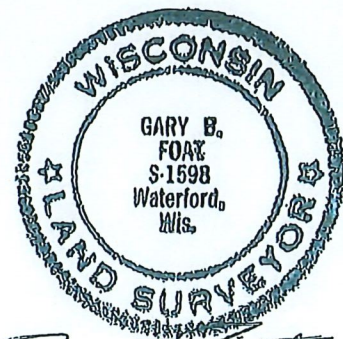
LEGEND

- ⊕ - FOUND KENOSHA COUNTY CONCRETE MONUMENT
- ⊙ - FOUND 3/4" INSIDE DIA. IRON PIPE
- ⊙ - FOUND 1" INSIDE DIA. IRON PIPE
- - SET 1" IRON PIPE, 18" IN LENGTH, 1.68 LBS./LIN. FT.
- ⊙ - UTILITY POLE
- () - RECORDED AS

W. LINE OF THE SE 1/4 OF SEC. 20-1-19
N 01°19'23" W 2669.88



SOUTH 1/4 CORNER SECTION 20-1-19
N. 195,713.72
E. 2,464,876.09



KENOSHA COUNTY CERTIFIED SURVEY MAP NO: _____

Village Of Twin Lakes Certified Survey Map No. _____

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SURVEYOR'S CERTIFICATE

I, GARY B. FOAT, WISCONSIN PROFESSIONAL LAND SURVEYOR, DO HEREBY CERTIFY THAT I HAVE SURVEYED, DIVIDED AND MAPPED THE DIVISION OF LOT 2 OF KENOSHA COUNTY CERTIFIED SURVEY MAP NO. 2676, RECORDED AS DOCUMENT NO. 1629015, LOCATED IN THE SOUTHWEST 1/4 OF THE SOUTHEAST 1/4 OF SECTION 20, TOWN 1 NORTH, RANGE 19 EAST OF THE FOURTH PRINCIPAL MERIDIAN, VILLAGE OF TWIN LAKES, KENOSHA COUNTY, WISCONSIN AND DESCRIBED AS FOLLOWS: COMMENCE AT THE SOUTH 1/4 CORNER OF SAID SECTION 20; THENCE N 37°41'01" E ALONG THE CENTERLINE OF WEST MAIN STREET, 292.27 FEET; THENCE S 67°14'33" E, 34.15 FEET TO A POINT ON THE SOUTHEASTERLY RIGHT-OF-WAY LINE OF WEST MAIN STREET AND THE POINT OF BEGINNING; THENCE N 37°41'01" E ALONG SAID SOUTHEASTERLY LINE, 605.40 FEET; THENCE N 52°48'49" E ALONG SAID SOUTHEASTERLY LINE, 268.54 FEET; THENCE S 42°38'49" E, 267.71 FEET TO A POINT ON THE NORTHWESTERLY RIGHT-OF-WAY LINE OF C.T.H. "O" (LANCE DRIVE); THENCE 156.21 FEET ALONG SAID NORTHWESTERLY LINE ON AN ARC OF A CURVE TO THE LEFT HAVING A RADIUS OF 5779.58 FEET AND A CHORD THAT BEARS S 46°34'43" W, 156.20 FEET; THENCE S 45°48'16" W ALONG SAID NORTHWESTERLY LINE, 611.94 FEET; THENCE N 67°14'33" W, 231.21 FEET TO THE POINT OF BEGINNING. CONTAINING 217,801 SQUARE FEET OF LAND.

THAT I HAVE MADE SAID SURVEY, LAND DIVISION AND MAP BY THE DIRECTION OF ERWIN HINTZ AND MARY J, HINTZ, MEMBERS OF TWIN LAKES STORAGE LLC, OWNERS OF SAID LAND.

THAT SUCH MAP IS A TRUE AND CORRECT REPRESENTATION OF THE EXTERIOR BOUNDARIES OF THE LAND SURVEYED AND THE LAND DIVISION THEREOF MADE.

THAT I HAVE FULLY COMPLIED WITH THE PROVISIONS OF CHAPTER 236.34 OF THE WISCONSIN STATUTES AND THE ORDINANCES OF THE VILLAGE OF TWIN LAKES IN SURVEYING, DIVIDING AND MAPPING THE SAME.

MAY 18th, 2020

 REVISED: OCTOBER 23rd, 2023

GARY B. FOAT S-1598
WISCONSIN PROFESSIONAL LAND SURVEYOR

KENOSHA COUNTY CERTIFIED SURVEY MAP NO. _____

Village Of Twin Lakes Certified Survey Map No. _____

BEING A DIVISION OF LOT 2 OF KENOSHA COUNTY CERTIFIED SURVEY MAP NO. 2676,
RECORDED AS DOCUMENT NO. 1629015, LOCATED IN THE SOUTHWEST 1/4 OF THE
SOUTHEAST 1/4 OF SECTION 20, TOWN 1 NORTH, RANGE 19 EAST OF THE FOURTH
PRINCIPAL MERIDIAN, VILLAGE OF TWIN LAKES, KENOSHA COUNTY, WISCONSIN.

OWNER'S CERTIFICATE:

AS OWNERS, WE HEREBY CERTIFY THAT WE HAVE CAUSED THE LAND DESCRIBED ON THIS MAP
TO BE SURVEYED, DIVIDED AND MAPPED AS REPRESENTED ON THE MAP, WE ALSO CERTIFY
THAT THIS MAP IS REQUIRED TO BE SUBMITTED TO THE FOLLOWING FOR APPROVAL.

VILLAGE OF TWIN LAKES

WITNESS THE HAND AND SEAL OF SAID OWNER THIS _____ DAY OF _____, 20__.

IN THE PRESENCE OF:

TWIN LAKES STORAGE, LLC
ERWIN HINTZ
MARY J. HINTZ
N3445 COMO ROAD
LAKE GENEVA, WI 53147

ERWIN HINTZ

MARY J. HINTZ

STATE OF WISCONSIN)
KENOSHA COUNTY) ss

PERSONALLY CAME BEFORE ME THIS _____ DAY OF _____, 20__, THE ABOVE NAMED
ERWIN HINTZ AND MARY J. HINTZ, MEMBERS OF TWIN LAKES STORAGE, LLC. TO ME KNOWN
TO BE THE PERSONS WHO EXECUTED THE FOREGOING INSTRUMENT AND ACKNOWLEDGED THE
SAME.

NOTARY PUBLIC, STATE OF WISCONSIN

COMMISSION EXPIRES

James B. Smith

RESOLUTION NO. 2024-1-1

**RESOLUTION TO RELEASE DRAINAGE EASEMENT IN FAIRWAY WOODS
SUBDIVISION**

The Village Board of the Village of Twin Lakes, Kenosha County, Wisconsin, do resolve as follows:

WHEREAS, on the subdivision plat for the “Fairway Woods” subdivision, being a part of Section 15, Township 1 North, Range 19 East, located in the Village of Twin Lakes and recorded in the Kenosha County Register of Deeds Office as Plat #1865, Document # 1511720, on February 23, 2007, there was dedicated to the Village a certain 20’ drainage easement running along the boundary between Lot 29 and Lot 30 and along the rear of Lot 31 through Lot 37, as depicted on Exhibit A hereto (“Easement”); and,

WHEREAS, the Village has determined that it no longer has any need for the Easement, now or in the future; and,

WHEREAS, the Village desires to permanently and forever release the Easement so that the encumbered properties may be better developed, as their respective owners see fit.

NOW, THEREFORE, BE IT RESOLVED by the Village Board of the Village of Twin Lakes, that the Easement is hereby forever vacated and released; and,

BE IT FURTHER RESOLVED that the Village President, the Village Clerk, the Village Administrator, and any other Village officials are hereby authorized and directed to undertake such actions, and to execute such documents, as are required, to accomplish the release of the Easement and the recording of this Resolution against the properties previously encumbered by the Easement.

Adopted by the Village Board of the Village of Twin Lakes, Kenosha County, Wisconsin, this ____ day of _____, 2024.

VILLAGE OF TWIN LAKES

By: _____
Howard Skinner, Village President

Attest: _____
Sabrina Waswo, Village Clerk

CERTIFICATION

I, Sabrina Waswo, as Village Clerk for the Village of Twin Lakes, Kenosha County, Wisconsin, do hereby certify that a duly called and noticed meeting of the Village of Twin Lakes Village Board on the _____ day of _____, 2024, the attached Resolution was adopted by the Village Board by a vote of ____ ayes and ____ nays.

Dated this ____ day of _____, 2024.

Sabrina Waswo
Village Clerk

STATE OF WISCONSIN)
) SS:
COUNTY OF KENOSHA)

Personally came before me this _____ day of _____ 2024, Sabrina Waswo, Village Clerk of the Village of Twin Lakes, Wisconsin, to me known to be the person who executed the foregoing instrument, and acknowledged the same as the act and deed of said Village.

Notary Public, Racine County, WI
Name:
My Commission Expires:

