

Annexation Review Questionnaire

Wisconsin Department of Administration

WI Dept. of Administration
Municipal Boundary Review
101 E. Wilson Street, 9th Floor
Madison WI 53703
608-264-6102 Fax: 608-264-6104
wimunicipalboundaryreview@wi.gov
<http://doa.wi.gov/municipalboundaryreview/>

Petitioner: **Lee Martin**

Petition Number: **14072**

1. Territory to be annexed: From **TOWN OF WAUKESHA** To **CITY OF WAUKESHA**

2. Area (Acres): 0.76

3. Pick one: ☒ Property Tax Payments

OR ☐ Boundary Agreement

a. Annual town property tax on territory to be annexed:

\$ 277.35

a. Title of boundary agreement _____

b. Year adopted _____

b. Total that will be paid to Town

(annual tax multiplied by 5 years): 1,386.75

c. Participating jurisdictions _____

d. Statutory authority (pick one)

c. Paid by: ☐ Petitioner ☒ City ☐ Village

☐ s.66.0307 ☐ s.66.0225 ☐ s.66.0301

☐ Other: _____

4. Resident Population: Electors: 2 Total: 3

5. Approximate **present land use** of territory:

Residential: 100 % Recreational: _____ % Commercial: _____ % Industrial: _____ %

Undeveloped: _____ %

6. If territory is undeveloped, what is the **anticipated use**?

Residential: _____ % Recreational: _____ % Commercial: _____ % Industrial: _____ %

Other: _____ %

Comments: _____

7. Has a ☐ preliminary or ☐ final plat been submitted to the Plan Commission: ☐ Yes ☒ No

Plat Name: _____

8. What is the **nature of land use adjacent** to this territory in the city or village?

RESIDENTIAL

In the town?: RESIDENTIAL

9. What are the **basic service needs** that precipitated the request for annexation?

☒ Sanitary sewer ☒ Water supply ☐ Storm sewers

☒ Police/Fire protection ☒ EMS ☒ Zoning

Other: _____

10. Is the city/village or town capable of providing needed utility services?

City/Village ☒ Yes ☐ No Town ☐ Yes ☒ No

If yes, approximate timetable for providing service:

Sanitary Sewers immediately

City/Village

Town

☐

☐

or, write in number of years. _____

Water Supply immediately

☐

☐

or, write in number of years. _____

Will provision of sanitary sewers and/or water supply to the territory proposed for annexation require capital expenditures (i.e. treatment plant expansion, new lift stations, interceptor sewers, wells, water storage facilities)?

☐ Yes ☒ No

If yes, identify the nature of the anticipated improvements and their probable costs: _____

11. Planning:

a. Do you have a comprehensive plan for the City/Village/Town? ☒ Yes ☐ No

Is this annexation consistent with your comprehensive plan? ☒ Yes ☐ No

Describe: _____

b. Annual appropriation for planning? \$ _____

c. How is the annexation territory now zoned? RESIDENTIAL

d. How will the land be zoned and used if annexed? RESIDENTIAL

12. Other relevant information and comments bearing upon the public interest in the annexation:

Prepared by: ☐ Town ☒ City ☐ Village

Name: DOUG KOEHLER

Email: DKOEHLER@WAUKESHA-WI.GOV

Phone: 262-524-3756

Date: 12/27/2017

Please **RETURN PROMPTLY** to:

wimunicipalboundaryreview@wi.gov

Municipal Boundary Review

PO Box 1645, Madison WI 53701

Fax: (608) 264-6104