

Request for Annexation Review

Wisconsin Department of Administration

WI Dept. of Administration
Municipal Boundary Review
PO Box 1645, Madison WI 53701
608-264-6102 Fax: 608-264-6104
wimunicipalboundaryreview@wi.gov
<http://doa.wi.gov/municipalboundaryreview>

Petitioner Information

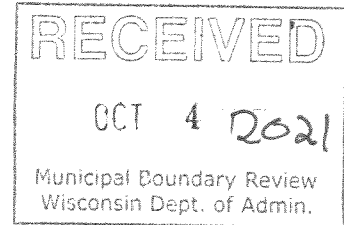
Name: **ROSE ANNE CALLIES**

Address: **W8172 OLLINGER RD**

BEAVER DAM, WI 53916

Email: **KRISKAYE2001@YAHOO.COM**

Office use only:



1. Town where property is located: **TOWN OF BEAVER DAM**

2. Petitioned City or Village: **CITY OF BEAVER DAM**

3. County where property is located: **DODGE**

4. Population of the territory to be annexed: **1**

5. Area (in acres) of the territory to be annexed: **22.45 Acres**

6. Tax parcel number(s) of territory to be annexed
(if the territory is part or all of an existing parcel): **004-1214-2741-000**

Petitioners phone:

920-763-2882

Town clerk's phone:

920-887-0791 X 13

City/Village clerk's phone:

920-887-4600

Contact Information if different than petitioner:

Representative's Name and Address:
NEUMANN DEVELOPMENTS INC.
BRYAN LINDGREN

N27W24025 PAUL CT, SUITE 100

PEWAUKEE, WI 53072

Phone: **262-542-9200**

E-mail:
BLINDGREN@NEUMANNCOMPANIES.CO
M

Surveyor or Engineering Firm's Name & Address:
SEH INC.
KEITH KINDRED

501 MAPLE AVE

DELAFIELD, WI 53018

Phone: **262-370-0165**

E-mail: **KKINDRED@SEHINC.COM**

Required Items to be provided with submission (to be completed by petitioner):

1. ☒ Legal Description meeting the requirements of s.66.0217 (1) (c) [see attached annexation guide]
2. ☒ Map meeting the requirements of s. 66.0217 (1) (g) [see attached annexation guide]
3. ☒ Signed Petition or Notice of Intent to Circulate is included
4. Indicate Statutory annexation method used:
 - ☒ Unanimous per s. 66.0217 (2), or,
 - OR
 - ☐ Direct by one-half approval per s. 66.0217 (3)
5. ☒ Check or money order covering review fee [see next page for fee calculation]

Annexation Review Fee Schedule

A Guide for Calculating the Fee Required by ss.16.53 (4) and 66.0217, Wis. Stats.

Required Fees

There is an initial filing fee and a variable review fee

\$350 Initial Filing Fee (required with the first submittal of all petitions)
\$200 – 2 acres or less
\$350 – 2.01 acres or more

\$800 Review Fee (required with all annexation submittals except those that consist ONLY of road right-of-way)
\$200 – 2 acres or less
\$600 – 2.01 to 10 acres
\$800 – 10.01 to 50 acres
\$1,000 – 50.01 to 100 acres
\$1,400 – 100.01 to 200 acres
\$2,000 – 200.01 to 500 acres
\$4,000 – Over 500 acres

\$1150 TOTAL FEE DUE (Add the Filing Fee to the Review Fee)

Attach check or money order here, payable to: **Department of Administration**

**THE DEPARTMENT WILL NOT PROCESS
AN ANNEXATION PETITION THAT IS NOT ACCOMPANIED
BY THE REQUIRED FEE.**

**THE DEPARTMENT'S 20-DAY STATUTORY REVIEW PERIOD
COMMENCES UPON RECEIPT OF THE PETITION AND REVIEW FEE**

Shaded Area for Office Use Only

Date fee received: 10-4-2021

Payee: Neumann Developments Inc

Check Number: 1940

Check Date: 9-28-21

Amount: \$1,150⁰⁰

ANNEXATION SUBMITTAL GUIDE

s. 66.0217 (5) THE PETITION

- ☒ State the purpose of the petition:
- Direct annexation by unanimous approval; OR
 - Direct annexation by one-half approval; OR
 - Annexation by referendum.
- ☒ Petition must be signed by:
- All owners and electors, if by unanimous approval.
 - See 66.0217 (3) (a), if by one-half approval.
 - See 66.0217 (3) (b), if by referendum.
- ☒ State the population of the land to be annexed.

[It is beneficial to include Parcel ID or Tax numbers, the parcel area, and identify the annexee (Town) and annexor (Village or City) in the petition.]

s. 66.0217 (1) (c) THE DESCRIPTION

- ☒ The annexation petition must include a legal description of the land to be annexed. The land must be described by reference to the government lot, private claim, quarter-section, section, town and range in which the land lies. The land must be further described by metes and bounds commencing from a monumented corner of the section or quarter-section, or the monumented end of a private claim or federal reservation, in which the land lies; OR
- ☒ If the land is wholly and entirely within a lot or lots, or all of a block or blocks of a recorded subdivision plat or certified survey map, it must be described by reference to the lot (s) and/or block (s) therein, along with the name of the plat or the number, volume, page, and County of the certified survey map.
- ☒ The land may NOT be described only by:
- Aliquot part;
 - Reference to any other document (plat of survey, deed, etc.);
 - Exception or Inclusion;
 - Parcel ID or tax number.

s. 66.0217 (1) (g) THE MAP

- ☒ The map shall be an **accurate reflection** of the legal description of the parcel being annexed. As such, it must show:
- A tie line from the parcel to the monumented corner of the section or quarter-section, or the monumented end of a private claim or federal reservation, in which the parcel lies. The corner and monument must be identified.
 - Bearings and distances along all parcel boundaries as described.
 - All adjoining as referenced in the description.
- ☒ The map must include a **graphic scale**.
- ☒ The map must show and identify the existing municipal boundary, in relation to the parcel being annexed.

[It is beneficial to include a North arrow, and identify adjacent streets and parcels on the map.]

s. 66.0217 FILING

- ☒ The petition must be filed with the Clerk of the annexing City or Village and with the Clerk of the Town in which the land is located.
- ☐ If the annexation is by one-half approval, or by referendum, the petitioner must post notice of the proposed annexation as required by s. 66.0217 (4).
- ☒ If the lands being annexed are within a County of 50,000 or greater population, the petition must also be filed with the Department of Administration for review

[Note that no municipality within a County of 50,000 or greater population may enact an annexation ordinance prior to receiving a review determination from the Department of Administration.]

ANNEXATION EXHIBIT

ALL OF LOT 1 OF CERTIFIED SURVEY MAP 3417
AND PART OF THE NORTHEAST 1/4 OF THE SOUTHEAST 1/4
SECTION 27, TOWN 12 NORTH, RANGE 14 EAST,
IN THE TOWN OF BEAVER DAM, DODGE COUNTY, WISCONSIN

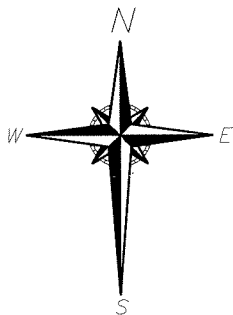
LEGEND



CONCRETE MONUMENT W/ BRASS CAP
FOUND



1" REBAR FOUND (UNLESS OTHERWISE
STATED)

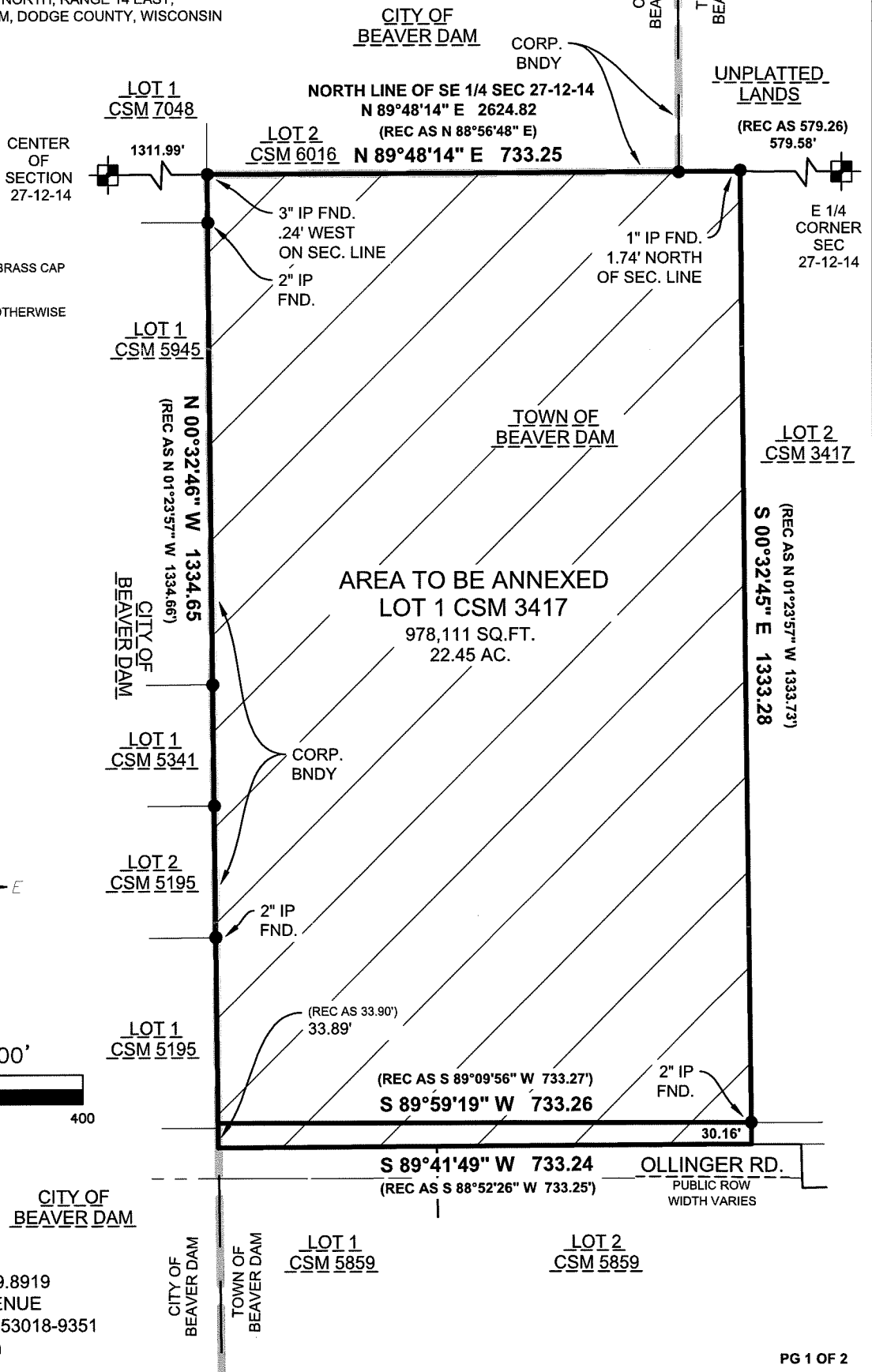


SCALE: 1" = 200'



PHONE: 414.949.8919
501 MAPLE AVENUE
DELAFIELD, WI 53018-9351
www.sehinc.com

PROJECT NEUMA 160369



ANNEXATION EXHIBIT

ALL OF LOT 1 OF CERTIFIED SURVEY MAP 3417
AND PART OF THE NORTHEAST 1/4 OF THE SOUTHEAST 1/4
SECTION 27, TOWN 12 NORTH, RANGE 14 EAST,
IN THE TOWN OF BEAVER DAM, DODGE COUNTY, WISCONSIN

LANDS TO BE ANNEXED

All of Lot 1 of Certified Survey Map 3417 and part of the Northeast 1/4 of the Southeast 1/4, Section 27, Township 12 North, Range 14 East, in the Town of Beaver Dam, Dodge County, Wisconsin, bounded and described as follows:

Commencing at the Northeast corner of the Southeast 1/4 of Section 27, Township 12 North, Range 14 East, thence South 89°48'14" West along the North line of the Southeast 1/4 of said Section 27, a distance of 579.58 feet to the point of beginning of the hereinafter described lands; thence South 00°32'45" East along the West line of Lot 2 of Certified Survey Map 3417 and the extension thereof a distance of 1333.28 feet to the Centerline of Ollinger Road; thence South 89°41'49" West along the centerline of said Ollinger Road, 733.24 feet; thence North 00°32'46" West along the East line of Certified Survey Map 5341 and Certified Survey Map 5945 a distance of, 1334.65 feet to a point on the North line of said Southeast 1/4 of Section 27; thence North 89°48'14" East along said North line of the Southeast 1/4, a distance of 733.25 feet to the point of beginning.

Said lands contain 978,111 square feet, 22.45 acres.

**PETITION FOR DIRECT ANNEXATION BY UNANIMOUS APPROVAL
PURSUANT TO SECTION 66.021(12), WISCONSIN STATUTES WHERE
ELECTORS RESIDE IN TERRITORY**

TO: The Common Council of the City of Beaver Dam
Dodge County, Wisconsin

We, the undersigned, constituting all of the electors of the following described territory located in the Town of Beaver Dam, Dodge County, Wisconsin lying contiguous to the City of Beaver Dam, petition the Common Council of the City of Beaver Dam to annex the territory described below and shown upon the attached map, which map reasonably shows the boundaries of such territory and the relation of such territory to the municipalities involved, as permitted by Chapter 66 of the Wisconsin Statutes, to the City of Beaver Dam, Dodge County, Wisconsin.

LEGAL DESCRIPTION:

The Land is described as follows:

All of Lot 1 of Certified Survey Map 3417 and part of the Northeast 1/4 of the Southeast 1/4, Section 27, Township 12 North, Range 14 East, in the Town of Beaver Dam, Dodge County, Wisconsin, bounded and described as follows:

Commencing at the Northeast corner of the Southeast 1/4 of Section 27, Township 12 North, Range 14 East, thence South 89°48'14" West along the North line of the Southeast 1/4 of said Section 27, a distance of 579.58 feet to the point of beginning of the hereinafter described lands; thence South 00°32'45" East along the West line of Lot 2 of Certified Survey Map 3417 and the extension thereof a distance of 1333.28 feet to the Centerline of Ollinger Road; thence South 89°41'49" West along the centerline of said Ollinger Road, 733.24 feet; thence North 00°32'46" West along the East line of Certified Survey Map 5341 and Certified Survey Map 5945 a distance of, 1334.65 feet to a point on the North line of said Southeast 1/4 of Section 27; thence North 89°48'14" East along said North line of the Southeast 1/4, a distance of 733.25 feet to the point of beginning.

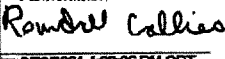
Said lands contain 978,111 square feet, 22.45 acres.

The current population of such territory is 1.

The territory to be annexed is approximately 22.45 acres.

That the Parcel shall retain its Town zoning until rezoned by the City of Beaver Dam.

We, the undersigned, elect that this annexation shall take effect to the full extent consistent with outstanding priorities of other annexation, incorporation, or consolidation proceedings, if any.

	<u>Signature of Petitioner</u>	<u>Date of Signing</u>	<u>Owner*</u>	<u>Elector*</u>	<u>Address or Description of Property</u>
1)	<small>Authentisign</small>  <small>9/22/2021 4:39:06 PM CDT</small>	09/22/2021	X		W8172 Ollinger Rd Beaver Dam, WI 53916
2)					
3)					
4)					

* If elector, write "elector" in the appropriate box; if owner, write "owner" in the appropriate box.

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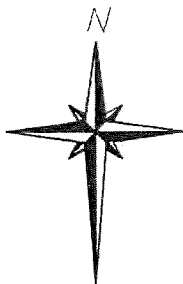
LEGEND



CONCRETE MONUMENT W/ BRASS CAP
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1" REBAR FOUND (UNLESS OTHERWISE
STATED)



SCALE: 1" = 200'



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PROJECT NELMA 160369

CITY OF
BEAVER DAM

CITY OF
BEAVER DAM

CITY OF
BEAVER DAM

CORP.
BNDY

CITY OF
BEAVER DAM

TOWN OF
BEAVER DAM

UNPLATTED
LANDS

(REC AS 579.26)
579.58'

E 1/4
CORNER
SEC
27-12-14

LOT 1
CSM 7048

CENTER
OF
SECTION
27-12-14

1311.99'

NORTH LINE OF SE 1/4 SEC 27-12-14
N 89°48'14" E 2624.82
(REC AS N 88°56'48" E)
LOT 2
CSM 6016 N 89°48'14" E 733.25

LOT 2
CSM 6016

3" IP FND.
.24' WEST
ON SEC. LINE
2" IP
FND.

1" IP FND.
1.74' NORTH
OF SEC. LINE

LOT 1
CSM 5945

N 00°32'46" W 1334.65
(REC AS N 01°23'57" W 1334.66')

CITY OF
BEAVER DAM

TOWN OF
BEAVER DAM

LOT 2
CSM 3417

(REC AS N 01°23'57" W 1333.73)
S 00°32'45" E 1333.28

AREA TO BE ANNEXED
LOT 1 CSM 3417
978,111 SQ.FT.
22.45 AC.

LOT 1
CSM 5341

CORP.
BNDY

LOT 2
CSM 5195

2" IP
FND.

LOT 1
CSM 5195

(REC AS 33.90')
33.89'

(REC AS S 89°09'56" W 733.27')
S 89°59'19" W 733.26

2" IP
FND.

30.16'

S 89°41'49" W 733.24
(REC AS S 88°52'26" W 733.25')

OLLINGER RD.
PUBLIC ROW
WIDTH VARIES

LOT 1
CSM 5859

LOT 2
CSM 5859

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Said lands contain 978,111 square feet, 22.45 acres.



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PROJECT NEUMA 160369

FINANCIAL POWER OF ATTORNEY
ROSE ANNE CALLIES

KNOW ALL PEOPLE BY THESE PRESENTS, That I, **Rose Anne Callies**, of Beaver Dam, County of Dodge, State of Wisconsin, have made, constituted and appointed and by these presents do make, constitute and appoint **Randall R. Callies**, of Beaver Dam, State of Wisconsin, my true and lawful Attorney, and if **Randall R. Callies** is unable to serve, then I appoint **Janis R. Baux**, of Wisconsin Dells, State of Wisconsin, my true and lawful alternate Attorney, for me and in my name, place and stead to receive and receipt for any and all sums of money for payments due or to become due to me; to deposit in my name in any bank or banks any and all monies collected or received by them; to pay any and all bills, accounts, claims and demands now or hereafter payable by me and to act for me in any business in which I am now or have been engaged or interested and in connection with any contract or contracts heretofore made by me and generally to do and perform all matters and things, transact all business, sign checks, make, execute and acknowledge contracts, writings and instruments which may be proper or requisite to effectuate any matter or thing belonging to me, and generally to act for me in all matters affecting my personal and business property with the same force and effect and to all intents and purposes as though I were personally present and acting for myself; to sell, assign and transfer securities in my name and to buy securities for me and in my name; to vote on any stock held by me in any corporation; and further to contract, bargain, sell and sign all deeds and conveyances to such person or persons and for such sum or sums of money as to my said Attorney shall deem most appropriate for my benefit, and upon such sale or sales to sign all deeds and warranty deeds and to acknowledge and deliver the same and to accept and receive all sums of money and receipt therefor and to contract with real estate brokers for the same of said real property. The power to sell and convey my real estate shall include my residential and commercial real estate and shall include the right to sell a fractional interest in said real estate as my said Attorney shall deem to be to my benefit.

My Attorney-In-Fact shall have access to any safe deposit box of mine wherever located, and to remove the contents and surrender the box, as my Attorney sees fit. Any institution in which a safe deposit box of mine is located is not liable to me or my heirs or estate for permitting my Attorney to exercise this power.

My Attorney-In-Fact shall represent and act for me before the Internal Revenue Service or Treasury Department of the United States, and before the tax department of any state, county or municipality, in any and all tax matters in which I am concerned, and particularly in the matter of my income tax returns and assessments, with full authority to prepare, sign and file claims for refund and receive refund checks; to receive and examine confidential information, including without limitation copies of tax returns with all schedules and appendices; and to take appeals, file protests and execute waivers and closing agreements.

My Attorney-In-Fact shall purchase and pay for insurance insuring my health, life and property, including without limitation health, life, accident, disability, property, casualty and liability insurance; to make necessary claims, to settle, compromise and adjust claims; to surrender and cancel insurance policies; to borrow from insurers and third parties using insurance policies as collateral.

My Attorney-In-Fact shall execute all necessary instruments for health insurance, including but not limited to any instruments requested by Medicare, Medicaid or a private insurer, for the purpose of submitting claims and collecting reimbursements, initiating, canceling or renewing coverage and paying of premiums, and for any other purpose my Attorney believes necessary.

I authorize (1) my health care agent(s) under a Health Care Power of Attorney or similar document, (2) immediate family members, including my spouse, children, grandchildren, parents, and siblings, and/or (3) close personal friend, access to and copies of any protected health information related to my current care or past care that may be relevant to my current care if I am unable to make an immediate decision regarding such consent at the time of admission to a medical facility. This consent is consistent with 45 C.F.R. Sec. 164.502(g)(2) and 45 C.F.R. Sec. 164.510(b) and I request that the covered entity err on the side of disclosure.

In addition, my Attorney-In-Fact shall be empowered:

To employ and compensate medical personnel, including physicians, surgeons, dentists, medical specialists, nurses, psychologists, chiropractors, physical therapists and paramedical assistants deemed by my Attorney needful for the proper care, custody and control of my person, and to do so without liability for any neglect, omission, misconduct or fault of a physician or other medical personnel, provided the physician or other medical personnel were selected and retained with reasonable care, and to dismiss any such person at any time, with or without cause. Any medical personnel engaged to treat me may rely on this Power of Attorney in divulging information as to my mental or physical condition.

To disclaim any interest that I may have in any property.

To create or establish a living trust, or amend or revoke any living trust created by me should my attorney-in-fact believe it desirable to do so. I specifically grant authority to establish a WisPACT pooled trust as specified under 42 USC 1396p (d) (4) and transfer assets into the trust so created, which may be a WisPACT Trust I or II, or any appropriate community trust.

To establish, modify or revoke any transfer on death (TOD) designation I have signed as long as such document treats my children or those taking through them equally. This power to establish, modify or revoke shall permit my Attorney-in-Fact to designate himself even though it may benefit him.

To enter into any post-marital agreement with my spouse allowable under Wisconsin law, including any marital property agreement as defined in Section 766.01(12) of the Wisconsin Uniform Marital Property Act, specifically including the power to reclassify property as individual or marital.

My agent shall have the power to establish one or more "individual retirement accounts" or other retirement plans or arrangements in my name.

In connection with any pension, profit sharing or stock bonus plan, individual retirement arrangement, Roth IRA, Sec. 403(b) annuity or account, Sec. 457 plan, or any other retirement

plan, arrangement or annuity in which I am a participant or of which I am a beneficiary (whether established by my agent or otherwise) (each of which is hereinafter referred to as "such Plan"), my agent shall have the following powers, in addition to all other applicable powers granted by this instrument:

1. To make contributions (including "rollover" contributions) or cause contributions to be made to such Plan with my funds or otherwise on my behalf.
2. To receive and endorse checks or other distributions to me from such Plan, or to arrange for the direct deposit of the same in any account in my name.
3. To elect a form of payment of benefits from such Plan, to withdraw benefits from such Plan, to make contributions to such Plan and to make, exercise, waive or consent to any and all elections and/or options that I may have regarding the contributions to, investments or administration of, or distribution or form of benefits under, such Plan.
4. To designate one or more beneficiaries or contingent beneficiaries for any benefits payable under such Plan on account of my death, and to change any such prior designation of beneficiary made by me or by my Agent; provided, however, that my Agent shall have no power to designate my Agent direct or indirectly as a beneficiary or contingent beneficiary to receive a greater share or proportion of any such benefits that my Agent would have otherwise received unless such change is consented to by all other beneficiaries who would have received the benefits but for the proposed change. This limitation shall not apply to any designation of my Agent as beneficiary in a fiduciary capacity, with no beneficial interest.

My Attorney-In-Fact and his heirs, personal representatives and assigns are released and forever discharged from all liability to me, my heirs and assigns, the beneficiaries under my will or under any trust that I have created or may create, or to any other person, because of any act or failure to act under this Power of Attorney.

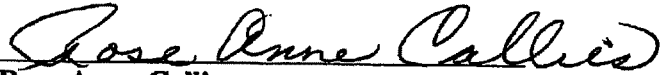
My Attorney-In-Fact has no power or authority with respect to (a) a policy of insurance owned by me on the life of my Attorney, or (b) a trust created by my Attorney of which I am a trustee.

This durable Power of Attorney shall remain in full force and effect until and unless I personally revoke it, in a written notice delivered to my Attorney-In-Fact. Thereby giving and granting unto my said Attorney full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in and about the premises, as full to all intents and purposes as I might or could do if personally present, with full power of substitution and revocation, hereby ratifying all that my said Attorney, or his substitute shall lawfully do or cause to be done by virtue thereof.

Copies of this document shall be as valid as the original.

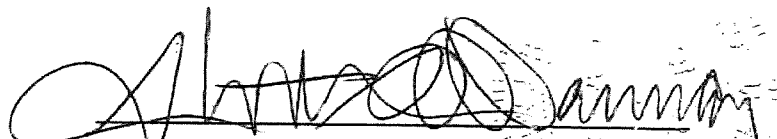
THIS POWER OF ATTORNEY SHALL NOT BE AFFECTED BY SUBSEQUENT
DISABILITY OR INCAPACITY OF THE PRINCIPAL.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 26 day of January, 2015.


Rose Anne Callies

STATE OF WISCONSIN)
) ss.
COUNTY OF DODGE)

Personally came before me this 26 day of January, 2015, the above named Rose Anne Callies, to me known to be the person who executed the foregoing instrument and acknowledged the same.


Notary Public, Dodge County, WI
My Commission: _____ is permanent

This Document Drafted By:
Atty. Stephen J. Hannan
Beaver Dam, WI 53916

Annexation Review Questionnaire

Wisconsin Department of Administration

WI Dept. of Administration
Municipal Boundary Review
PO Box 1645
Madison WI 53701
608-264-6102 Fax: 608-264-6104
wimunicipalboundaryreview@wi.gov
<http://doa.wi.gov/municipalboundaryreview>

Petitioner: **Callies**

Petition Number: **14450**

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

2. Area (Acres): **22.458**

3. Pick one: ☒ Property Tax Payments

OR ☐ Boundary Agreement

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

\$ **223.39**

a. Title of boundary agreement _____

b. Year adopted _____

b. Total that will be paid to Town

(annual tax multiplied by 5 years): **1,116.95**

c. Participating jurisdictions _____

c. Paid by: ☐ Petitioner ☒ City ☐ Village

d. Statutory authority (pick one)

☐ s.66.0307 ☐ s.66.0225 ☐ s.66.0301

☐ Other: _____

4. Resident Population: Electors: **0** Total: **0** (*per 2020 census*).

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

Residential: **10** % Recreational: _____ % Commercial: _____ % Industrial: _____ %

Undeveloped: **90** %

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

Residential: **100** % 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?

Light Manufacturing

In the town?: **Agricultural**

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:

City/Village Town

Sanitary Sewers immediately

or, write in number of years.

☒ 9-12 months ☐

Water Supply immediately

or, write in number of years.

☒ 9-12 months ☐

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 & Zoning:

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

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

b. How is the annexation territory now zoned? Agricultural

c. How will the land be zoned and used if annexed? Residential

12. Elections: ☐ New ward or ☒ Existing ward? Will the annexation create a new ward or join an existing ward? For more information, please contact the Wisconsin Election Commission at (608) 266-8005, elections@wi.gov or see their annexation checklist here: <http://elections.wi.gov/forms/el-100>

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

Prepared by: ☐ Town ☒ City ☐ Village

Name: Zachary Bloom

Email: zbloom@cityofbeaverdam.com

Phone: 920-887-4604

Date: 10/13/2021

(March 2018)

Please **RETURN PROMPTLY** to:

wimunicipalboundaryreview@wi.gov

Municipal Boundary Review

PO Box 1645, Madison WI 53701

Fax: (608) 264-6104

REAL PROPERTY LISTERS ANNEXATION REVIEW

1. Territory to be annexed: PIN 004-1214-2741-000	From Town of: Beaver Dam	To City of: Beaver Dam
--	-----------------------------	---------------------------

2. Checklist: (Y) Yes; (N) No; (NA) Not applicable; (NC) Not checked

Location and Position

__y__ (1) Location description by government lot, recorded private claim, ¼ - ¼ section, section, township, range and county

__y__ (2) Contiguous with existing village/city boundaries

n/a (3) Creates an island area in Township (completely surrounded by city)

n/a (4) Creates an island area in City (completely surrounded by town)

Petition and Map Information

__y__ (1) Identify owner(s) of annexed land

__y__ (2) Identify parcel ID numbers included in annexation.

n/a (3) Identify parcel ID numbers being split by annexation

__y__ (4) North arrow

__y__ (5) Graphic Scale

__y__ (6) Streets and Highways shown and identified

__y__ (7) Legend

__y__ (8) Total area/acreage of annexation

3. Other relevant information and comments:

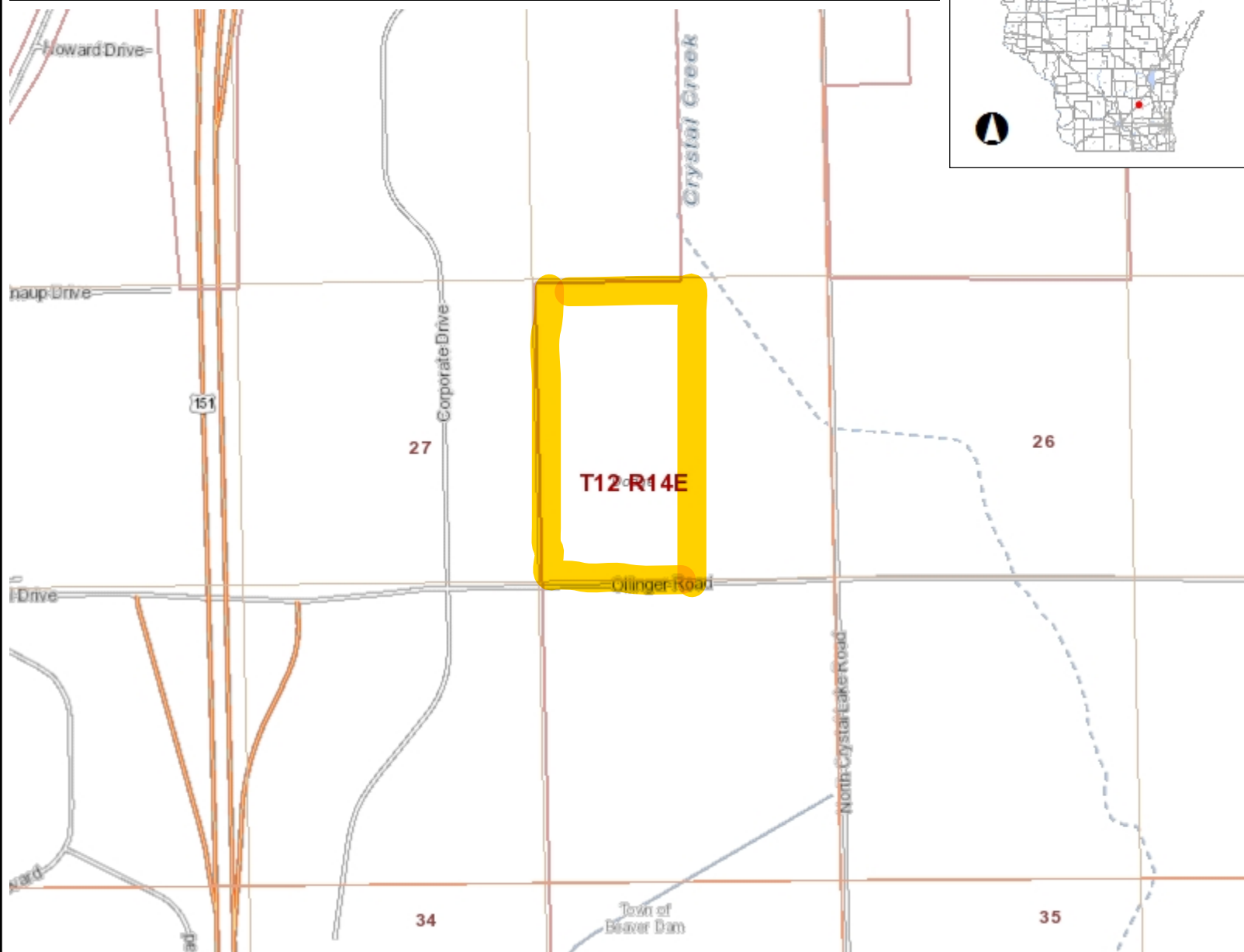
A couple minor concerns about the description, but nothing that should affect the integrity of this annexation.

Prepared by: David Addison _____
 Title: Dodge County LIO _____
 Phone: 920-386-3773 _____
 Date: 10/20/2021 _____

Please **RETURN PROMPTLY** to:
 Municipal Boundary Review
 PO Box 1645
 Madison WI 53701
 (608) 264-6102 FAX (608) 264-6104
wimunicipalboundaryreview@wi.gov



Surface Water Data Viewer Map



Legend

- Township
- Section
- Quarter-Quarter
- County Boundary
- Cities, Towns & Villages
 - City
 - Village
 - Civil Town
- Municipality
- State Boundaries
- County Boundaries
- Major Roads
 - Interstate Highway
 - State Highway
 - US Highway
- County and Local Roads
 - County HWY
 - Local Road
- Railroads
- Tribal Lands
- Rivers and Streams
- Intermittent Streams
- Lakes and Open water

0.3 0 0.13 0.3 Miles

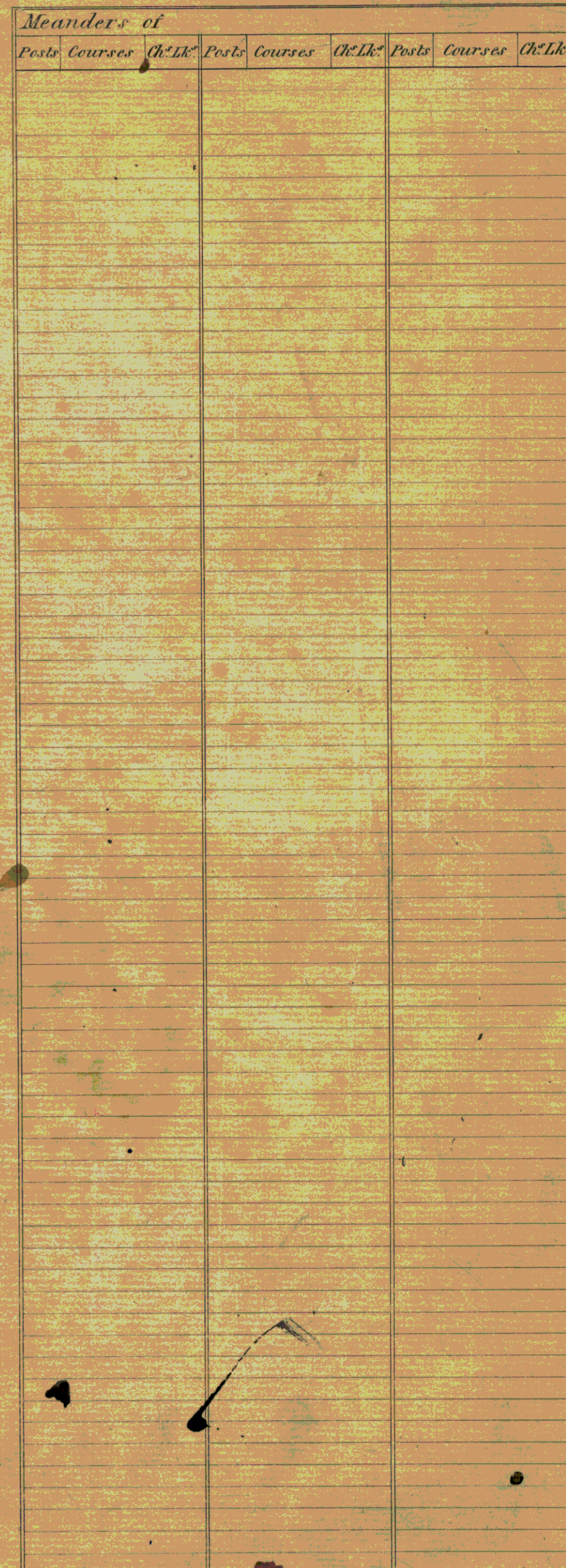
NAD_1983_HARN_Wisconsin_TM

1: 7,920

DISCLAIMER: The information shown on these maps has been obtained from various sources, and are of varying age, reliability and resolution. These maps are not intended to be used for navigation, nor are these maps an authoritative source of information about legal land ownership or public access. No warranty, expressed or implied, is made regarding accuracy, applicability for a particular use, completeness, or legality of the information depicted on this map. For more information, see the DNR Legal Notices web page: <http://dnr.wi.gov/legal/>

Notes

Harrison 172-14
M. L.
50



Surveys Designated	By Whom Surveyed	Date of Contract	Amount of Surveys	When Surveyed	When p ^d for and ch ^d in the Sur. Gen. ^l acc ^t
Township lines	Hallitt & Brink	July 9. 1833	M. Ch. ^s Lks. 24. 06. 10	2. 9. 1834	3. 9. 1834
Subdivisions	G. W. Harrison	16. Sep. 1834	61. 12. 22	1. 9. 1835	2. 9. 1835

Surveyor General's Office,
Cincinnati, Oct. 23, 1835

Robt. Lytle, Sur. Genl.



TONY EVERS

GOVERNOR

JOEL BRENNAN

SECRETARY

Municipal Boundary Review

PO Box 1645, Madison WI 53701

Voice (608) 264-6102 Fax (608) 264-6104

Email: wimunicipalboundaryreview@wi.gov

Web: <http://doa.wi.gov/municipalboundaryreview>

October 26, 2021

PETITION FILE NO. 14450

ZAK BLOOM, CLERK
CITY OF BEAVER DAM
205 S LINCOLN AVE
BEAVER DAM, WI 53916-2323

ABBY KLODOWSKI, CLERK
TOWN OF BEAVER DAM
W8540 COUNTY RD W
BEAVER DAM, WI 53916-9422

Subject: CALLIES ANNEXATION

The proposed annexation submitted to our office on October 04, 2021, has been reviewed and found to be in the public interest. In determining whether an annexation is in the public interest, s. 66.0217 (6), Wis. Stats. requires the Department to examine "[t]he shape of the proposed annexation and the homogeneity of the territory with the annexing village or city...." so as, to ensure the resulting boundaries are rational and compact. The statute also requires the Department to consider whether the annexing city or village can provide needed municipal services to the territory. The subject petition is for territory that is reasonably shaped and contiguous to the **CITY OF BEAVER DAM**, which is able to provide needed municipal services.

The Department reminds clerks of annexing municipalities of the requirements of s. 66.0217 (9)(a), Wis. Stats., which states:

"The clerk of a city or village which has annexed shall file immediately with the secretary of administration a certified copy of the ordinance, certificate and plat, and shall send one copy to each company that provides any utility service in the area that is annexed. The clerk shall record the ordinance with the register of deeds and file a signed copy of the ordinance with the clerk of any affected school district..."

State and federal aids based on population and equalized value may be significantly affected through failure to file with the Department of Administration. Please file a copy of your annexing ordinance, including a statement certifying the population of the annexed territory. **Please include your MBR number 14450 with your ordinance.** Ordinance filing checklist available at <http://mds.wi.gov/>, click on "Help on How to Submit Municipal Records". Email scanned copy of required materials (color scan maps with color) to mds@wi.gov or mail to: Wisconsin Department of Administration, Municipal Boundary Review, PO Box 1645, Madison WI 53701-1645.

The petition file is available for viewing at: <http://mds.wi.gov/View/Petition?ID=2524>
Please call me at (608) 264-6102, should you have any questions concerning this annexation review.

Sincerely,

Erich Schmidtke, Municipal Boundary Review

cc: petitioner