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		Office use only:		
Name: FORT HEALTHCARE INC.				
Address: 611 SHERMAN AVENUE		RECEIVED		
FORT ATKINSON, WI 53538		May 10, 2022		
		Municipal Boundary Review		
Emoil: JAMES NELSON@EODTHC COM		Wisconsin Dept. of Admin.		
Email: JAMES.NELSON@FORTHC.COM				
1. Town where property is located: TOWN OF KOSHKONONG		Petitioners phone:		
2. Petitioned City or Village: CITY OF FORT ATKINSON		920-568-5490		
3. County where property is located: JEFFERSON COUNTY				
4. Deputation of the territory to be approved 0		Town clerk's phone: 920/563-4510		
4. Population of the territory to be annexed: 0		920/303-4310		
5. Area (in acres) of the territory to be annexed: 23.4076. Tax parcel number(s) of territory to be annexed				
(if the territory is part or all of an existing parcel): 016-0	614-3224-	City/Village clerk's phone:		
000		920/563-7760		
Contact Information if different than petitioner:				
		Engineering Firm's Name & Address:		
Dhana	Dhama			
Phone:	Phone:			
E-mail: E-mail:				
equired Items to be provided with submission (to be co				
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 appearation method used:				

• Unanimous per s. 66.0217 (2), 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: <u>5-9-20</u> 22		
Payee: City of Fort Atkinson	Check Number: <u>85964</u>	
	Check Date: 5-4-22	
	Amount: 1, 150 °°	

CLERK/TREASURER/FINANCE DIRECTOR Michelle Ebbert miebbert@fortatkinsonwi.net



Monday, May 02, 2022

Municipal Boundary Review Department of Administration P.O. Box 1645 Madison, WI 53701-1645

RE: Petition for Annexation; Parcel #016-0614-3224-000

To Whom It May Concern:

Please find enclosed a Request for Annexation Review with attachments, a map and legal description of the area to be considered for annexation, and a check made payable to the Wisconsin Department of Administration for the appropriate administration fees.

Please feel free to contact me with any questions.

Sincerely,

Michelle Ebbert

City Clerk/Treasurer/Finance Director

Maabobert

Enclosures



City of Fort Atkinson City Engineer's Office 101 N. Main Street Fort Atkinson, WI 53538

PETITION FOR ANNEXATION TO THE CITY OF FORT ATKINSON

Address(es) of Property: 672	5 US HWY 12, Fort Atkinson,	WI			
Parcel Number(s): 016-0614-3224-000					
The current population or territory to be annexed and/or attached is persons.					
We, the undersigned, county, Wisconsin, lying contige Council of the City of Fort Atkin scale map to the City of Fort Attachment must include a legal	son to annex the territory do Atkinson, Jefferson County,	cinson, respectfully per escribed and shown on Wisconsin. (Plat of A	tition the City the attached		
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. We further respectfully request that this property be zoned					
Owner/Petitioner Signature:	Print Name:	Address:	Date:		
Hames les	James J Nelson, SVP/CFO	611 Sherman Ave, E Fort Atkinson, WI	5/3/22		
V					
Personally came before me this 3 day of may , 2022 , the above named,					
Tames Relson to me known to be the persons who executed the					
foregoing instrument and acknowledged the same.					
Ribecca a Clecker					
Notary Public, Jefferson County, Wisconsin (SEAL)					
3.17074					
My Commission is permanent or expires on: $3 \cdot 6 \cdot 2024$					

FORT HEALTHCARE INC. ANNEXATION LEGAL DESCRIPTION

Unplatted lands being described in Document # 1365276 in the Jefferson County Register of Deeds Office and a part of the S.T.H. 26 right of way, all located in the SE 1/4 of the NW 1/4, the NE 1/4 of the NW 1/4 and the SW 1/4 of the NE 1/4 of Section 32, Town 6 North, Range 14 East in the Town of Koshkonong, Jefferson County, Wisconsin and being more particularly described as follows:

Commencing at the West 1/4 corner of Section 32, Town 6 North, Range 14 East in the Town of Koshkonong, Jefferson County, Wisconsin, thence S 89°48'27" E, 1306.57 feet along the south line of the NW 1/4 of said Section 32 to the SW corner of lands described in Document #1365276 and the POINT OF BEGINNING; thence continuing S 89°48'27" E, 1192.34 feet along the south line of lands described in Document #1365276 and the south line of the NW 1/4 of said Section 32 to the SW corner of Lot 1 of CSM #5612 and the easterly right of way of S.T.H. 26; thence N 48°02'17" E, 150.00 feet along the west line of Lot 1 of CSM #5612 and the easterly right of way of S.T.H. 26 to east line of the NW 1/4 of said Section 32; thence N 51°22'01" E, 473.18 feet along the west line of Lot 1 of CSM #5612 and the easterly right of way of S.T.H. 26 to the NW corner of Lot 1 of CSM #5612 and the southerly right of way of U.S.H. 12; thence N 57°15'21" W, 856.06 feet to the NE corner of lands described in Document # 1365276 and the westerly right of way of S.T.H. 26; thence N 52°52′28" W, 264.63 feet along the northerly line of lands described in Document # 1365276 and the southerly right of way of U.S.H. 12; thence N 66°32′56" W, 136.76 feet along the northerly line of lands described in Document # 1365276 and the southerly right of way of U.S.H. 12; thence N 57°23'47" W, 780.36 feet along the northerly line of lands described in Document # 1365276 and the southerly right of way of U.S.H. 12 to the NW corner of lands described in Document # 1365276 and the west line of the NE 1/4 of the NW 1/4 of said Section 32; thence S 01°33'10" E, 1489.92 feet along the west line of lands described in Document # 1365276 and the west line of the NE 1/4 of the NW 1/4 and the SE 1/4 of the NW 1/4 to the POINT OF BEGINNING.



ENGINEERING | ARCHITECTURE | SURVEYING FUNDING | PLANNING | ENVIRONMENTAL 201 Corporate Drive, Beaver Dam WI 53916 (920) 887-4242 www.msa-ps.com

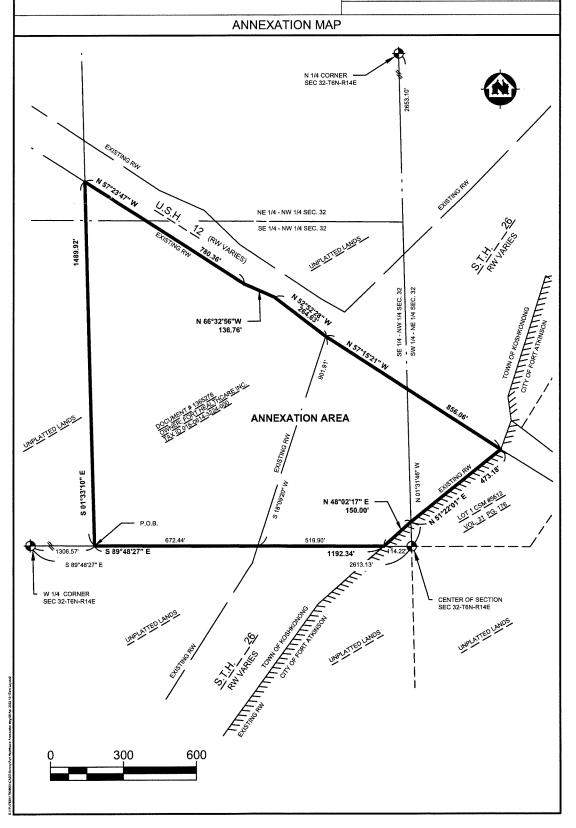
PROJECT NO. 17839001

DRAWN BY: B. BUCHDA

CHECKED BY:

FILE: FORT HEALTHCARE ANNEXATION.DWG

SHEET NO. 1 OF 1



Annexation Review Questionnaire

Wisconsin Department of Administration

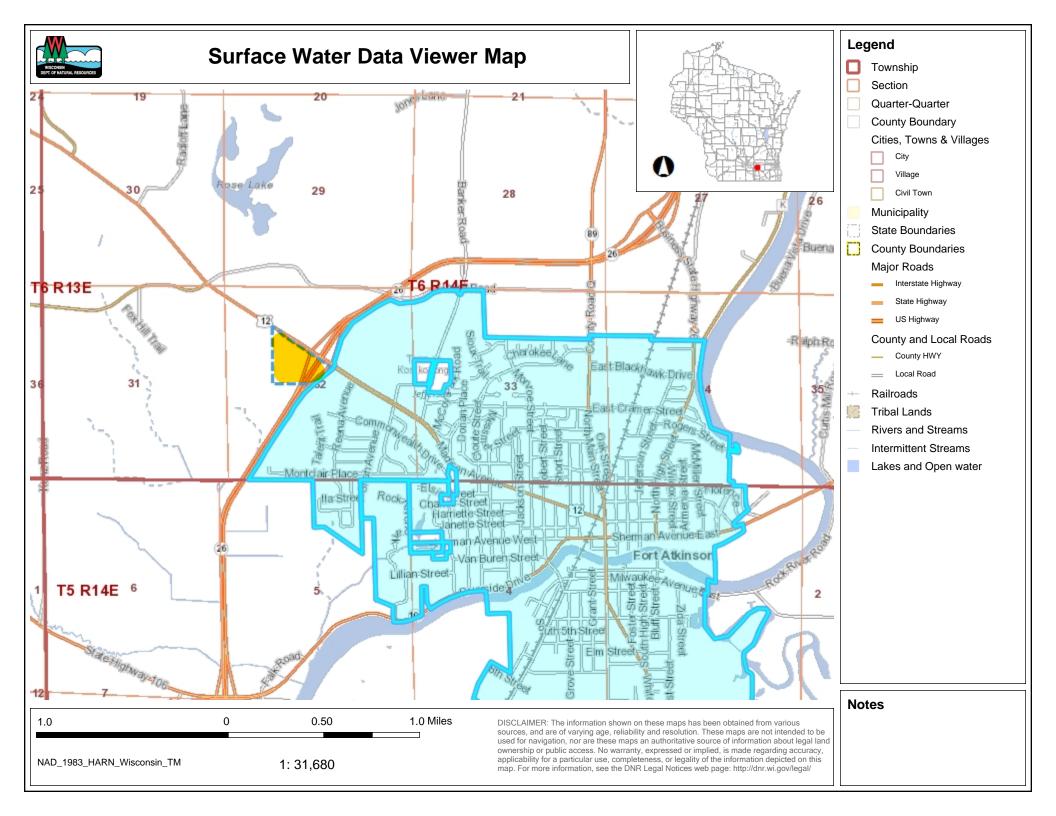
WI Dept. of Administration Municipal Boundary Review PO Box 1645 Madison WI 53701

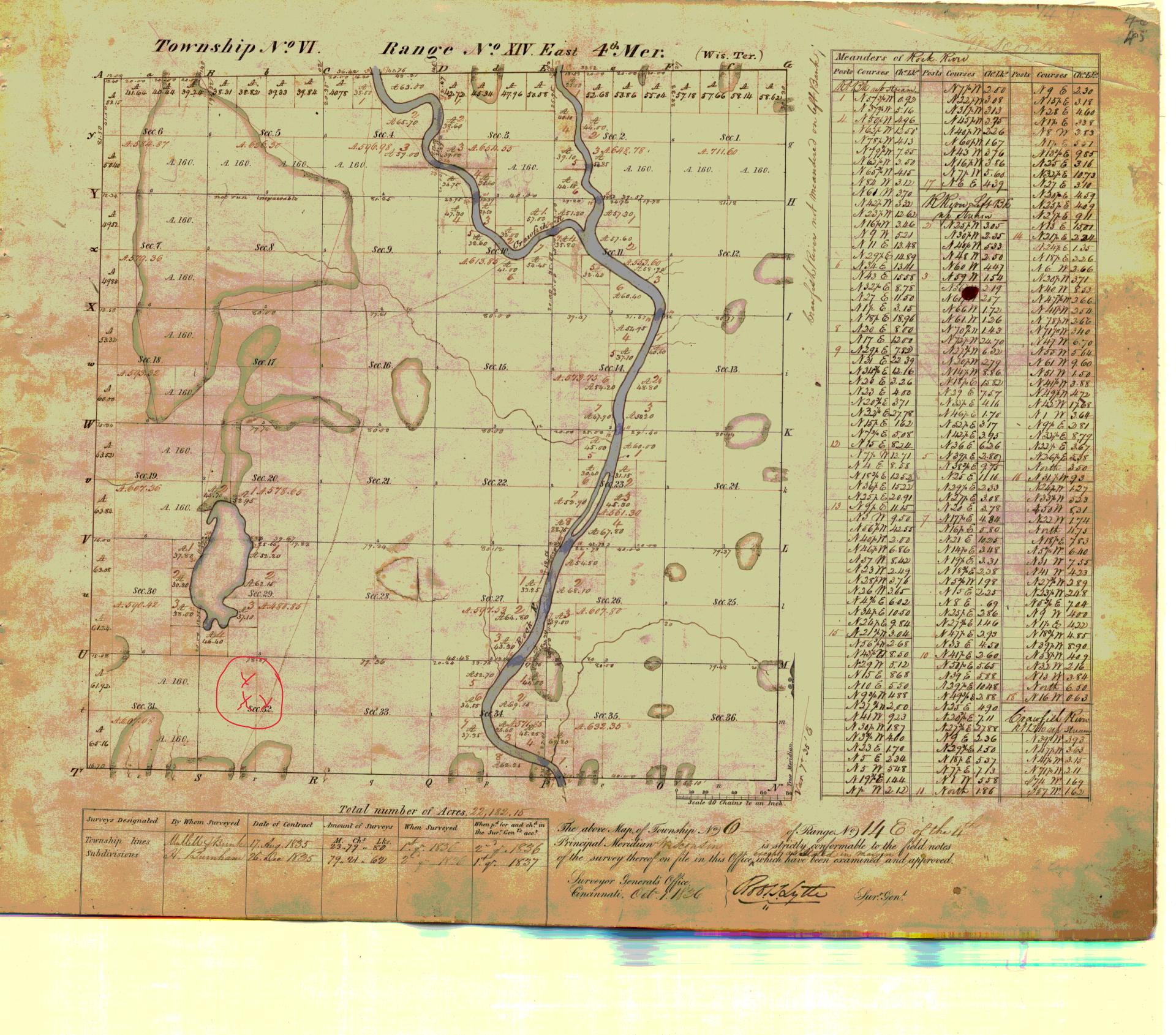
608-264-6102 Fax: 608-264-6104 wimunicipalboundaryreview@wi.gov http://doa.wi.gov/municipalboundaryreview

Petitioner: Fort Healthcare Inc	Petition Number: 14503	
1. Territory to be annexed: From TOWN OF KOSHKO	DNONG To CITY OF FORT ATKINSON	
2. Area (Acres): <u>23,40</u> 7		
3. Pick one: ✓ Property Tax Payments	OR ☐ Boundary Agreement	
a. Annual town property tax on territory to be annexed:	a. Title of boundary agreement	
\$ <u>117.19</u>	b. Year adopted	
b. Total that will be paid to Town	c. Participating jurisdictions	
(annual tax multiplied by 5 years): 585.95	_ 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: O Total	al: <u> </u>	
5. Approximate present land use of territory:		
Residential:% Recreational:%	Commercial:% Industrial:%	
Undeveloped: 100 %		
6. If territory is undeveloped, what is the anticipated use	9?	
Residential:% Recreational:% Commercial:% Industrial:%		
Other:%	0 3137	
Comments: <u>potential medical</u>	facility, yet unplanned	
7. Has a □ preliminary or □ final plat been submitted to t	the Plan Commission: ☐ Yes ☑ No	
Plat Name:		
8. What is the nature of land use adjacent to this territor	ory in the city or village?	
immediately adjacent to	Hwy 26, then City commercial zone	
In the town?:		
9. What are the basic service needs that precipitated th	e request for annexation?	
☑ Sanitary sewer	Storm sewers	
Police/Fire protection EMS	Zoning	
Other		

40 1-11-21-1211	Allik	
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.	<u> </u>	
Water Supply immediately		
or, write in number of years.	20	
	<u> </u>	
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	e/Town? -□ Yes □ No	
Is this annexation consistent with your comprehensive	e plan? ☐ Yes ☐ No	
b. How is the annexation territory now zoned? $A - 1$		
c. How will the land be zoned and used if annexed? RH-35 Rural Holding		
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	Please RETURN PROMPTLY to:	
Name: MICHELL EDBERT	wimunicipalboundaryreview@wi.gov	
Email: miebbert a fort atkinsonwi.	. Net Municipal Boundary Review	
Phone: 920.5623.7760	PO Box 1645, Madison WI 53701	
Date: 5-11-2022	Fax: (608) 264-6104	

(March 2018)







TONY EVERS
GOVERNOR
KATHY BLUMENFELD
SECRETARY-DESIGNEE

Municipal Boundary Review PO Box 1645, Madison WI 53701

Voice (608) 264-6102 Fax (608) 264-6104 Email: <u>wimunicipalboundaryreview@wi.gov</u> Web: <u>http://doa.wi.gov/municipalboundaryreview</u>

May 31, 2022

PETITION FILE NO. 14503

cc: petitioner

MICHELLE EBBERT, CLERK CITY OF FORT ATKINSON 101 N MAIN ST FORT ATKINSON, WI 53538-1861 BRIDGET WOODS, CLERK TOWN OF KOSHKONONG W5609 STAR SCHOOL RD FORT ATKINSON, WI 53538-9359

Subject: FORT HEALTHCARE INC ANNEXATION

The proposed annexation submitted to our office on May 10, 2022, 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 FORT ATKINSON**, which is able to provide needed municipal services.

Note: The area of the territory to be annexed is 34.31 acres, not 23.4 acres as noted in the petition.

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 14503 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=2577
Please call me at (608) 264-6102, should you have any questions concerning this annexation review.

Sincerely,

Erich Schmidtke, Municipal Boundary Review