



Wells County Plat Committee  
Addition  
Filing Form and Findings of Fact and Ruling Document

Filing Form

Owner's Name: \_\_\_\_\_  
(Owner's Name as shown on the current deed of record)

Owner's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Owner's Phone #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Buyer's Name: \_\_\_\_\_

Buyer's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Buyer's Phone #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

# Findings of Fact and Ruling Document

PETITION FOR AN ADDITION APPROVAL: \_\_\_\_\_  
(To Be Filled Out By the Area Plan Commission Office)

OWNER OF REAL ESTATE: \_\_\_\_\_  
(Owner's Name as shown on the current deed of record)

LOCATED AT: \_\_\_\_\_  
(Address or Adjoining Street Names "Ex: 100 N between 300 E and 400 E")

DESCRIPTION: \_\_\_\_\_  
(Brief Legal Description of Primary Parcel "Ex: 40 A in the NE ¼ of S12T25NR12E")

CURRENT ZONING CLASSIFICATION: \_\_\_\_\_  
(Use [www.wellscountygis.org](http://www.wellscountygis.org) or contact the Plan Commission Office for Information)

PROPOSED ADDITION "Petition": \_\_\_\_\_  
(Brief Description of the Petition "Ex: 2 Acres and 200' of Road Frontage")

PRINT DATE: \_\_\_\_\_  
(Date the document was filled out)

**4-04** This petition meets the definitions of an Addition. \_\_\_\_\_  
(Yes or No)

**4-08 (1):** This petition involves two or more parcels that are contiguous to each other. \_\_\_\_\_  
(Yes or No)

**4-08 (2):** This petition's deed of transfer will contain the required recital. \_\_\_\_\_  
(Yes or No)

**4-08 (3):** This petition shall not leave any conforming affected parcels that fail to satisfy the existing lot size, road frontage, and setback requirements for an Addition as prescribed in the Wells County Subdivision Control Ordinance. \_\_\_\_\_  
(Yes or No)

**Waiver or Modification of Requirements:**

(If you answer "No" to any statement listed above that does not have a corresponding note along with it you will need to file a request for modification of the Subdivision Control Requirements)

Requirement Number(s): \_\_\_\_\_  
(Section Number from the Ordinance)

**3-10 (2) (A):** \_\_\_\_\_

**Reason for the request of the Waiver or Modification of the Requirements of the Wells County Subdivision Control Ordinance**

**3-10 (2) (B) – (E):** The modification will not adversely affect the reasonable development of adjacent properties. The modification will not be detrimental to the public health, safety, and general welfare of the community. The modification does not materially affect the spirit and purpose of this Subdivision Control Ordinance. The Modification does not lower the Subdivision Control Ordinance requirements below those prescribed by the Zoning Ordinance. Any such modifications would need Variance approval from the Board of Zoning Appeals.

\_\_\_\_\_  
(Yes or No)

To Be Filled Out By the Petitioner or Petitioner's Agent

To Be Filled Out By the Petitioner

\_\_\_\_\_  
Signature Date Signature Date

\_\_\_\_\_  
Signature Date Signature Date

(This petition must be signed by 50% of the owners/sellers. If the power of attorney or the trustee is filing this petition then the proper paperwork shall be submitted proving their title to the Area Plan Commission)

To Be Filled Out By the Petitioner

To Be Filled Out By the Area Plan Commission Office

Comes now the Wells County Plat Committee and in support of granting \_\_\_\_\_  
Petition for an Addition makes the above Findings of Fact, to wit:

\_\_\_\_\_ filed a Petition for an Addition as to the following described real estate located in \_\_\_\_\_ Township, Wells County, Indiana; more particularly described on Exhibit A attached hereto.

On \_\_\_\_\_, the Wells County Plat Committee conducted a hearing on the Petition in accordance with the Rules of Procedure of the Wells County Plat Committee.

Board of Zoning Appeals Variances: \_\_\_\_\_

Plat Committee Modifications: \_\_\_\_\_

Conditions or Commitments: \_\_\_\_\_

Wherefore, based upon the above findings of fact and upon the Motion of \_\_\_\_\_, duly seconded by \_\_\_\_\_, the Petition for an Addition by \_\_\_\_\_ is hereby granted by a vote of \_\_\_\_\_ in favor and \_\_\_\_\_ opposed.

\_\_\_\_\_  
Plat Committee President

\_\_\_\_\_  
Plat Committee Secretary

## NOTICE OF AGRICULTURAL ACTIVITY

TO: ALL PETITIONERS IN AGRICULTURAL ZONED AREAS OF **WELLS** COUNTY, INDIANA

This notice is given to you because of your petition to move into an area of **Wells** County that is zoned for Agriculture.

The purpose of this notice is to assure you are aware that all agricultural operations are allowed in this area.

Agricultural activity may include, but is not limited to, grazing of livestock, confined feeding of livestock, application of animal manure to land, application of herbicides and pesticides to fields and growing crops, creation of dust from field operations and noise from livestock and machinery operations which includes the drying and transportation of grain, sometimes with machinery that has a "Slow Moving Vehicle" emblem on it, meaning it is traveling at 25 mph or less.

People who choose to live in these areas must understand that agricultural operations may be occurring nearby.

You must also understand that Indiana has a "RIGHT TO FARM" law that protects farm operations from unwarranted nuisance suits by neighbors who move next to an existing farm operation. Farm operations do not constitute a nuisance so long as they are not negligently maintained, do not endanger human health and do not cause bodily injury to third parties.

By signing this notice form you verify that you have received it, read it and understand it. You are not giving up the right to seek redress for negligence by individuals associated with a farm operation or by other residents of the area.

Signature	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date	Signature	Date

**(This document must be signed by the 50% of the owner/seller and buyer when applicable)**