

Street address Telephone

City of Madison Planning Division 126 S. Hamilton St. P.O. Box 2985 Madison, WI 53701-2985 (608) 266-4635 All Land Use Applications must be filed with the Zoning Office at the above address.		FOR OFFICE USE ONLY: Paid Receipt # Date received Received by Parcel # Aldermanic district Zoning district Special requirements			
This completed form is required for all applications for Plan Commission review except subdivisions or land divisions, which should be filed using the Subdivision Application found on the City's web site.			Review required by UDC Common Council	□ PC	
lie	the city 3 web site.		Reviewed By		
1. Pro	oject Informatio				
	ddress: 437 S Junction Rd				
Tit!	itle: Compassionate Veterinary Care				
		The second secon			
2. Thi	is is an applicat	ion for (check all that apply)			
☐ Zoning Map Amendment (rezoning) fromtoto					
	- Tar P 1/4	iment to an Approved Planned Dev		entation Plan (PD-SIP)	
		eration to Planned Development (P		KNA 7	
Conditional Use or Major Alteration to an Approved Conditional Use					
_	Demolition Permit				
	Other reques	τς			
3. Ap	plicant, Agent :	and Property Owner Information			
Ap	plicant name	Arlan Kay	Company Network Partners, LLC		
Street address		5685 Lincoln Rd	City/State/Zip <u>Oreg</u> o	City/State/Zip Oregon, WI 53575	
Tel	Telephone <u>608-235-1920</u>		Email arlan@kontextarchitects.com		
Pro	Project contact person Amy Hasselman		Company KONTEXT architects llc		
Street address		1110 N Bristol St	City/State/Zip _Sun P	Prairie, WI 53590	
Tel	Telephone <u>608-698-0715</u>		Email amy@kontextarchitects.com		
Pro	operty owner (if not applicant)			
Street addressCity/State			City/State/Zip		