



Location  
34 Schroeder Court

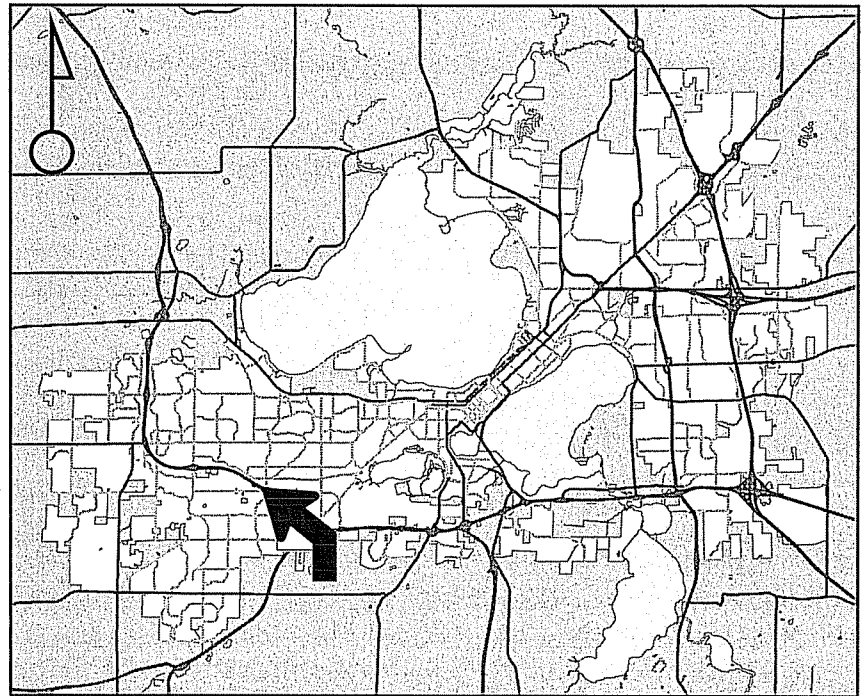
Project Name  
Madison Pain Management Office

Applicant  
Vishal Lal – Advanced Pain Management/  
Ray Rodenback – Wellman Architects

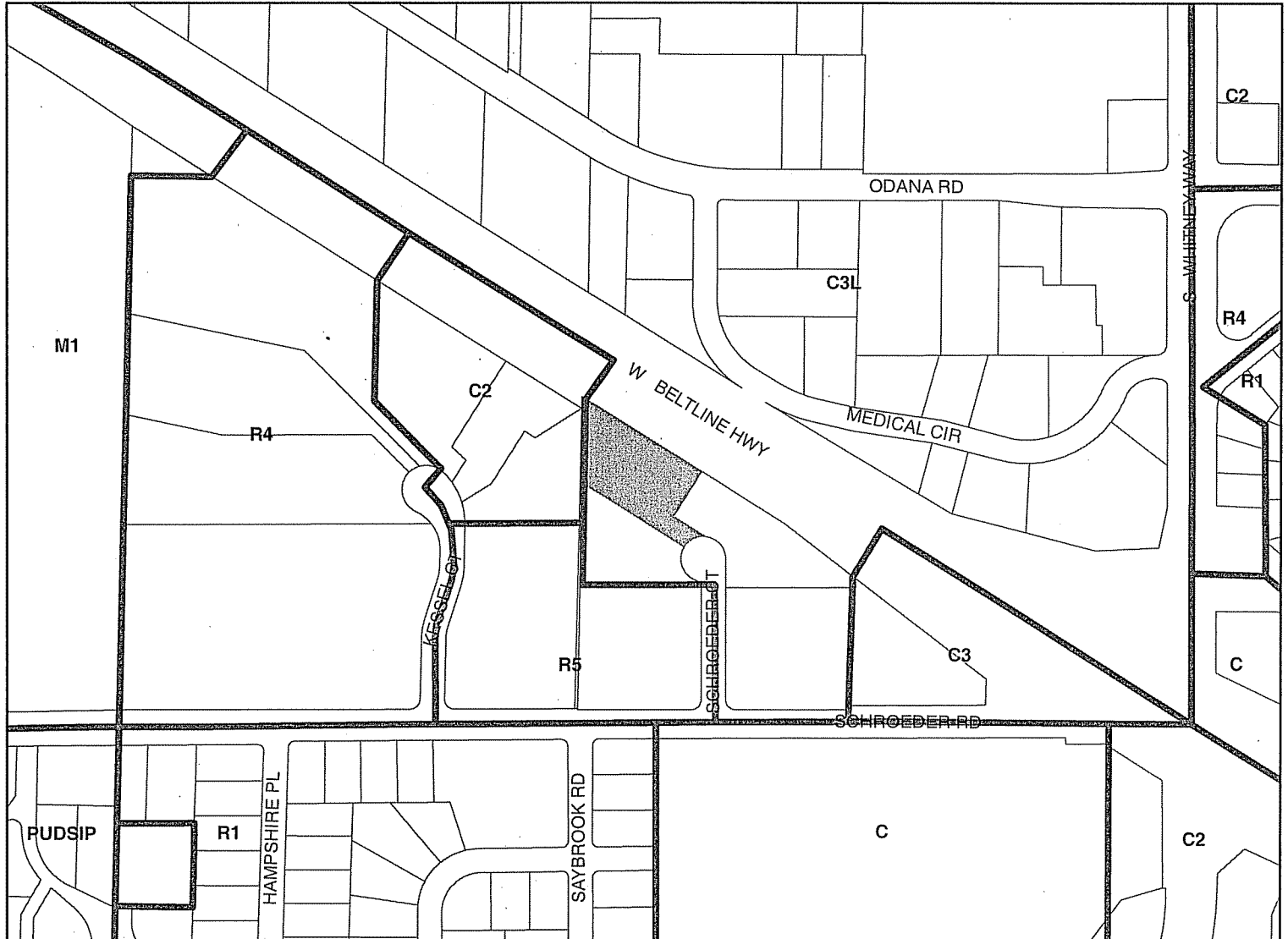
Existing Use  
Former Boy Scouts Building,  
Currently Vacant

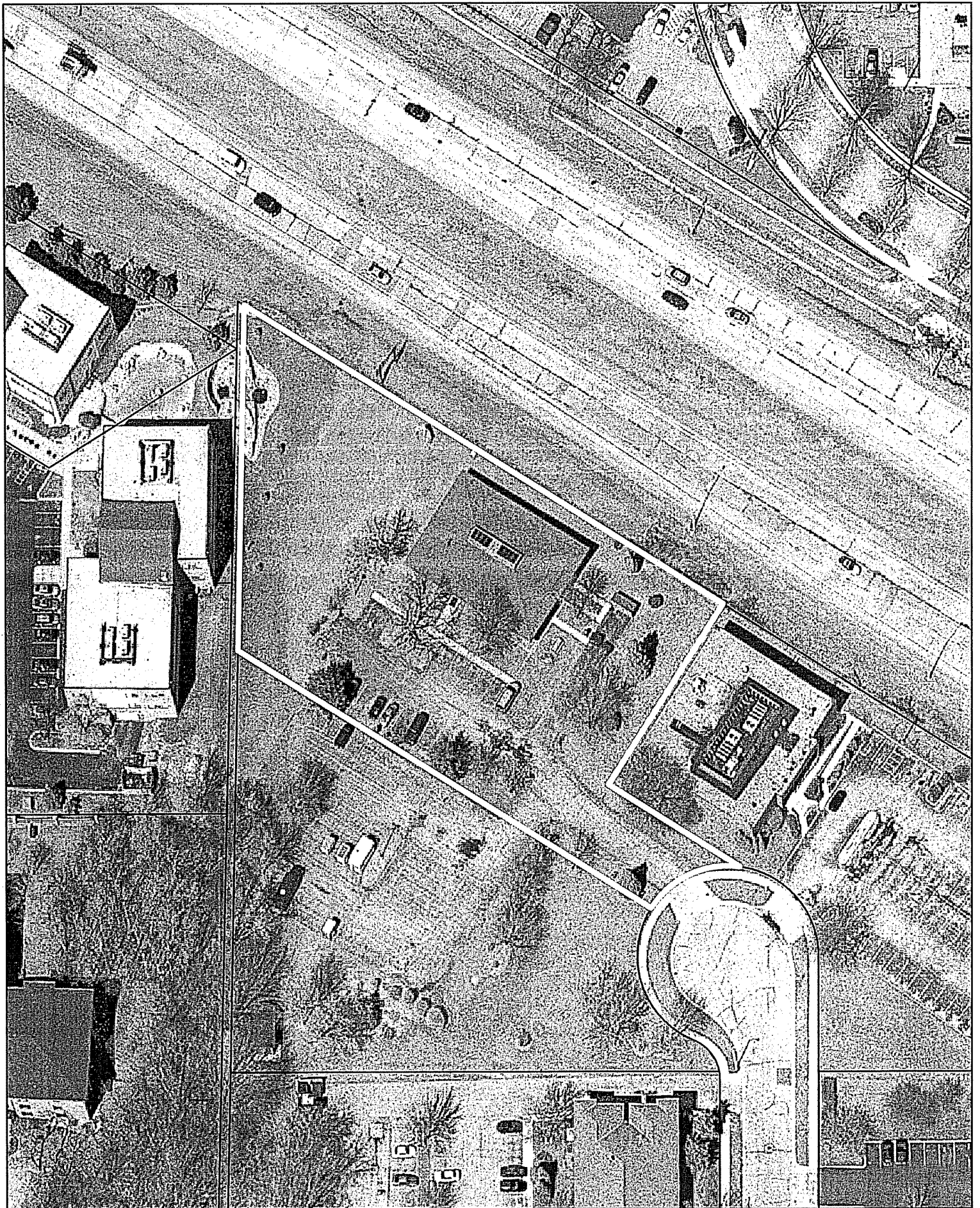
Proposed Use  
Demolish Former Boy Scouts Building  
to Construct Office Building

Public Hearing Date  
Plan Commission  
20 August 2007



For Questions Contact: Kevin Firchow at: 267-1150 or [kfirchow@cityofmadison.com](mailto:kfirchow@cityofmadison.com) or City Planning at 266-4635







# LAND USE APPLICATION Madison Plan Commission

215 Martin Luther King Jr. Blvd; Room LL-100  
PO Box 2985; Madison, Wisconsin 53701-2985  
Phone: 608.266.4635 | Facsimile: 608.267.8739

- The following information is required for all applications for Plan Commission review except subdivisions or land divisions, which should be filed with the Subdivision Application.
- Before filing your application, please review the information regarding the **LOBBYING ORDINANCE** on the first page.
- Please read all pages of the application completely and fill in all required fields.
- This application form may also be completed online at [www.cityofmadison.com/planning/plan.html](http://www.cityofmadison.com/planning/plan.html)
- All zoning applications should be filed directly with the Zoning Administrator.

OFFICE USE ONLY:	
Amt. Paid	<u>550 -</u> Receipt No. <u>83559</u>
Date Received	<u>7/18/07</u>
Received By	<u>MGP</u>
Parcel No.	<u>0709-303-0105-0</u>
Aldermanic District	<u>1- JED SANBORN</u>
GQ	<u>EXISTING CUP; UDD#2; LANDSCAPE B. FEE</u>
Zoning District	<u>C3 L</u>
<b>For Complete Submittal</b>	
Application	<input checked="" type="checkbox"/> Letter of Intent <input checked="" type="checkbox"/>
IDUP	<input type="checkbox"/> Legal Descript. <input checked="" type="checkbox"/>
Plan Sets	<input checked="" type="checkbox"/> Zoning Text <input type="checkbox"/>
<input checked="" type="checkbox"/> Alder Notification	<input type="checkbox"/> Waiver
Ngrbrhd. Assn Not.	<input type="checkbox"/> Waiver <input type="checkbox"/>
Date Sign Issued	<u>7/18/07</u>

1. Project Address: 34 SCHROEDER COURT Project Area in Acres: 2.325

Project Title (if any): MADISON PAIN MANAGEMENT

2. This is an application for: (check at least one)

<input type="checkbox"/> Zoning Map Amendment (check only ONE box below for rezoning and fill in the blanks accordingly)			
<input type="checkbox"/> Rezoning from _____ to _____	<input type="checkbox"/> Rezoning from _____ to PUD/ PCD-SIP		
<input type="checkbox"/> Rezoning from _____ to PUD/ PCD-GDP	<input type="checkbox"/> Rezoning from PUD/PCD-GDP to PUD/PCD-SIP		
<input type="checkbox"/> Conditional Use	<input checked="" type="checkbox"/> Demolition Permit	<input type="checkbox"/> Other Requests (Specify): _____	

3. Applicant, Agent & Property Owner Information:

Applicant's Name: VISHAL LAL Company: ADVANCED PAIN MANAGEMENT  
Street Address: 4131 W. LOOMIS ROAD City/State: GREENFIELD, WI. Zip: 53121  
Telephone: (414) 254-2984 Fax: ( ) Email: VLAL@APM-WI.NET

Project Contact Person: RAY RODENBECK Company: WELMAN ARCHITECTS  
Street Address: 21675 LONG VIEW DR. City/State: WAUKESHA Zip: 53186  
Telephone: (262) 798-7000 Fax: (262) 798-7001 Email: rodenbeck@welmanarch.com

Property Owner (if not applicant): VISHAL LAL  
Street Address: 4131 W. LOOMIS ROAD City/State: GREENFIELD, WI. Zip: 53121

4. Project Information:

Provide a general description of the project and all proposed uses of the site: CONSTRUCTION OF A  
NEW 50,000SF MEDICAL OFFICE BUILDING

Development Schedule: Commencement NOVEMBER 2007 Completion FEBRUARY 2008

CONTINUE →

**5. Required Submittals:**

- Site Plans** submitted as follows below and depicts all lot lines; existing, altered, demolished or proposed buildings; parking areas and driveways; sidewalks; location of any new signs; existing and proposed utility locations; building elevations and floor plans; landscaping, and a development schedule describing pertinent project details:
  - **Seven (7) copies** of a full-sized plan set drawn to a scale of one inch equals 20 feet (collated and folded)
  - **Seven (7) copies** of the plan set reduced to fit onto 11 inch by 17 inch paper (collated, stapled and folded)
  - **One (1) copy** of the plan set reduced to fit onto 8 1/2 inch by 11 inch paper
- Letter of Intent: Twelve (12) copies** describing this application in detail but not limited to, including: existing conditions and uses of the property; development schedule for the project; names of persons involved (contractor, architect, landscaper, business manager, etc.); types of businesses; number of employees; hours of operation; square footage or acreage of the site; number of dwelling units; sale or rental price range for dwelling units; gross square footage of building(s); number of parking stalls, etc.
- Legal Description of Property:** Lot(s) of record or metes and bounds description prepared by a land surveyor. For any application for rezoning, the description must be submitted as an electronic word document via CD or e-mail.
- Filing Fee:** \$\_\_\_\_\_ See the fee schedule on the application cover page. Make checks payable to: *City Treasurer.*

**IN ADDITION, THE FOLLOWING ITEMS MAY ALSO BE REQUIRED WITH YOUR APPLICATION; SEE BELOW:**

- For any applications proposing demolition of existing buildings, **photos** of the interior and exterior of the structure(s) to be demolished shall be submitted with your application. Be advised that a **Reuse and Recycling Plan** approved by the City's Recycling Coordinator is required prior to issuance of wrecking permits.
- A project proposing **ten (10) or more dwelling units** may be required to comply with the City's Inclusionary Zoning requirements outlined in Section 28.04 (25) of the Zoning Ordinance. A separate **INCLUSIONARY DWELLING UNIT PLAN** application detailing the project's conformance with these ordinance requirements shall be submitted concurrently with this application form. Note that some IDUP materials will coincide with the above submittal materials.
- A **Zoning Text** must accompany **all** Planned Community or Planned Unit Development (PCD/PUD) submittals.

**FOR ALL APPLICATIONS:** All applicants are required to submit copies of all items submitted in hard copy with their application (including this application form, the letter of intent, complete plan sets and elevations, etc.) as **INDIVIDUAL** Adobe Acrobat PDF files compiled either on a non-returnable CD to be included with their application materials, or in an e-mail sent to [pcapplications@cityofmadison.com](mailto:pcapplications@cityofmadison.com). The e-mail shall include the name of the project and applicant. Applicants who are unable to provide the materials electronically should contact the Planning Unit at (608) 266-4635 for assistance.

**6. Applicant Declarations:**

- Conformance with adopted City plans:** Applications shall be in accordance with all adopted City of Madison plans:

→ The site is located within the limits of the: COMPREHENSIVE PLAN Plan, which recommends: EMPLOYMENT for this property.

- Pre-application Notification:** Section 28.12 of the Zoning Ordinance requires that the applicant notify the district alder and any nearby neighborhood or business associations by mail no later than **30** days prior to filing this request:

→ List below the Alderperson, Neighborhood Association(s), Business Association(s) AND dates you sent the notices:

Alder Sen 5/17/07 Alder Sen Sen

*NOTE: If the alder has granted a waiver to this requirement, please attach any such correspondence to this form.*

- Pre-application Meeting with staff:** Prior to preparation of this application, the applicant is required to discuss the proposed development and review process with Zoning Counter and Planning Unit staff; note staff persons and date.

Planner Kevin Archow Date 6-14-07 | Zoning Staff MATT TUCK Date 6-14-07

**The signer attests that this form is accurately completed and all required materials are submitted:**

Printed Name M. G. Kelmman Date 6-18-07  
Signature [Signature] Relation to Property Owner Hone/Architect

Authorizing Signature of Property Owner Ushal Lal Date 7-9-07

July 17, 2007

Madison Pain Management  
Letter of Intent



The project consists of the demolition of an existing 4,644sf one-story vacant office building, and the construction of a new three-story 54,000sf office building with basement parking garage.

The first tenant will be a surgery center located on the first floor. This tenant is scheduled for occupancy in February. The remainder of the building will be medical/ professional offices.

The site is approximately 2.3 acres. A retention pond will be located at the Southwest corner of the site. Parking will consist of 126 spaces located on the exterior, and 39 spaces in the basement. A loading area will be located at the Southwest corner of the building.

A dumpster enclosure will be located at the South end of the property.

The exterior of the building will consist of two colors of brick, metal panel, and an aluminum glazing system.

Hours of operation will be approximately 8:00am to 6:00pm.

The people involved in the project are as follow:

Owner: Vishal Lal  
Advanced Pain Management  
4131 West Loomis Road  
Greenfield, Wisconsin 53220

Building Manager: Roger Vick  
Advanced Pain Management  
3230 Deming Way, Suite 100  
Middleton, WI 53562

Architect: Michael Welman  
Welman Architects, Inc.  
21675 Long View Drive  
Waukesha, Wisconsin 53186

Landscape Architect: Michael Davis  
InSite Landscape Design  
11525 W. North Ave.  
Wauwatosa, WI 53226

Civil Engineer: Wade Wyse  
Jenkins Survey & Design, Inc.  
161 Horizon Drive, Suite 101  
Verona, WI 53593

Contractor: Dave Martin  
Ideal Builders, Inc.  
1406 Emil Street  
Madison, Wisconsin 53713-2312

21675 Long View Drive  
Waukesha, WI 53186  
Phone: (262) 798-7000  
Fax: (262) 798-7001

# CITY OF MADISON PLAN COMMISSION SUBMITTAL

DATE: 07.17.2007

MADISON PAIN MANAGEMENT  
34 SCHROEDER COURT MADISON, WI

PROJECT No. 27036

ARCHITECT

OWNER

ENGINEERING CONSULTANTS

CONTRACTOR



21151 LOMIS DRIVE EAST  
MADISON, WI 53713  
PHONE: (608) 254-2994  
FAX: (608) 254-2994

MADISON INVESTMENTS, LLC  
4131 WEST LOOMIS ROAD, SUITE 300  
GREENFIELD, WI 53221  
PHONE: (414)-254-2994  
FAX: (414)-489-4881

Jenkins Survey & Design, Inc.  
181 Horizon Drive, Suite 101  
Verona, WI 53593  
PHONE: (608)-261-2500  
FAX: (608)-261-2225

Structural  
Dimension Inc.  
12101 Madison Hwy  
Madison, WI 53713

IDEAL BUILDERS  
1406 Emil St.  
Madison, WI 53713  
PHONE: (608)-271-8111  
FAX: (608)-271-6233

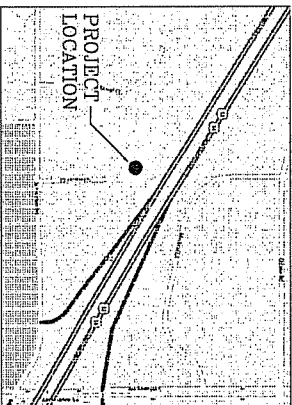
## SHEET INDEX

T1.0	TITLE SHEET
-	EXISTING SITE SURVEY (BY OTHERS)
C2.0	EROSION CONTROL, GRADING & UTILITIES PLAN
C2.1	SITE DETAILS
E0-a	PHOTOMETRIC PLAN
A0.1	SITE PLAN
A0.3	LANDSCAPE PLAN
A1.0	BASEMENT PLAN
A1.1	FIRST FLOOR PLAN
A1.2	SECOND FLOOR PLAN
A1.3	THIRD FLOOR PLAN
A2.1	EXTERIOR BUILDING ELEVATIONS
A2.2	EXTERIOR BUILDING ELEVATIONS

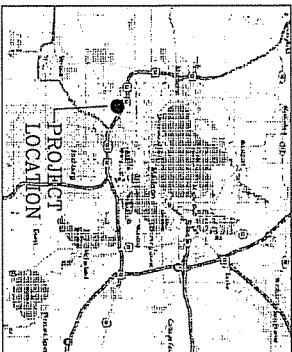
## CODE & BUILDING INFORMATION

<b>GOVERNING CODES:</b> ZONING CLASSIFICATION: CONSTRUCTION TYPE: FLOOR AREA: AUTOMATIC AREA: ALARMABLE AREA: SIGNALING SYSTEM: KESSES REQUIREMENT: MINIMUM TRAVEL DISTANCE: NUMBER OF REQUIRED EXITS: HEAD END PASSAGEWAY: COMMON PATH OF EXITS TRAVEL: FIRE EXTINGUISHER:	<b>WISCONSIN EXEMPTED COMMERCIAL CODE 2002</b> Business - Use Group D, SECTION 304 TYPE IIA, SECTION 602 37,500 sq/foot, Table 503 2002 For Automatic Sprinkler System (Automatic) Fully Sprinklered, NFPA 13 100 SF Gross (Other Egress Components 157/occupants) 1st Floor 10,000 SF / 100 SF = 101 Occupants 2nd Floor 10,000 SF / 100 SF = 101 Occupants 3rd Floor 10,000 SF / 100 SF = 101 Occupants 2 Falls 100x21 50'-0" Section 1004.5.2 100'-0" Section 1004.5.2 1 Per 3,000 SF (75'-0" Max. Travel Distance)	<b>FLOOR AREA (GROSS):</b> FIRST FLOOR: 10,000 sq. ft. SECOND FLOOR: 10,000 sq. ft. THIRD FLOOR: 10,000 sq. ft. <b>TOTAL BUILDING AREA (GROSS):</b> 30,000 sq. ft.
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LOCATION MAP



VICINITY MAP











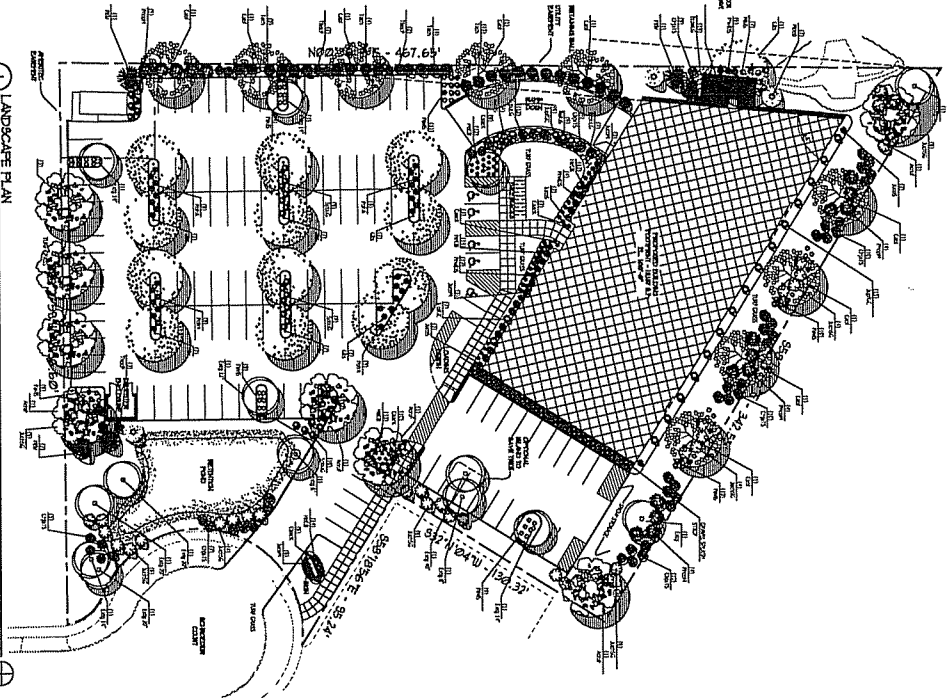
**TOTAL LANDSCAPE SQUARE FEET:**  
 40,000 SQ. FT. (100' x 400')  
**TOTAL PLANTING POINTS:**  
 1,200 PLANTING POINTS  
**TOTAL LANDSCAPE PLANTING POINTS:**  
 1,200 PLANTING POINTS

LANDSCAPE PLAN

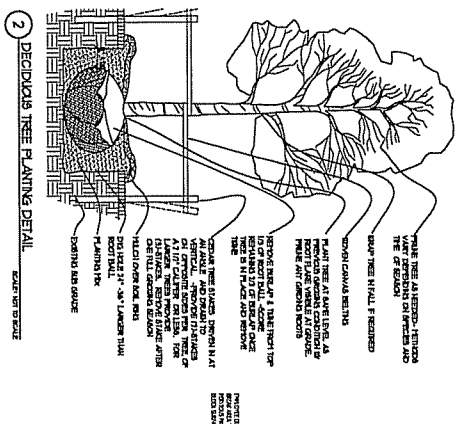
Planting Point	Planting Point	Planting Point	Planting Point	Planting Point	Planting Point	Planting Point	Planting Point	Planting Point	Planting Point
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11	12	13	14	15	16	17	18	19	20
21	22	23	24	25	26	27	28	29	30
31	32	33	34	35	36	37	38	39	40
41	42	43	44	45	46	47	48	49	50
51	52	53	54	55	56	57	58	59	60
61	62	63	64	65	66	67	68	69	70
71	72	73	74	75	76	77	78	79	80
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91	92	93	94	95	96	97	98	99	100

**GENERAL PLANTING NOTES:**

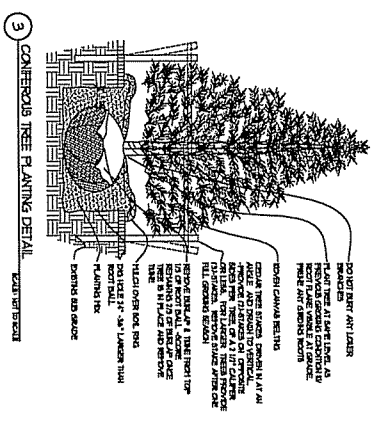
1. ALL PLANTING SHALL BE DONE IN ACCORDANCE WITH THE LATEST EDITIONS OF THE NATIONAL LANDSCAPE ARCHITECTURE ASSOCIATION (NLA) AND THE NATIONAL FLORICULTURAL SOCIETY (NFS) PLANTING STANDARDS.
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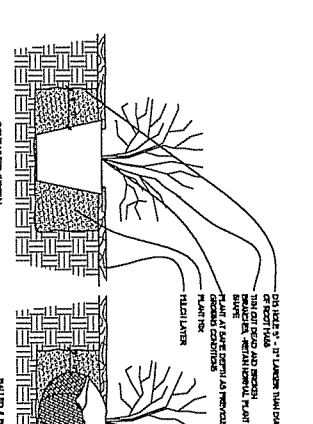
1 LANDSCAPE PLAN



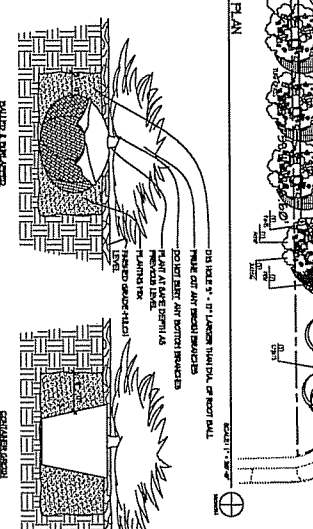
2 DECIDUOUS TREE PLANTING DETAIL



3 CONIFEROUS TREE PLANTING DETAIL



4 DECIDUOUS TREE PLANTING DETAIL



5 CONIFEROUS TREE PLANTING DETAIL

**WELLMAN ARCHITECTS**  
 2157 LEON AVENUE, SUITE 200  
 MADISON, WISCONSIN 53704  
 TEL: 608.261.1111  
 FAX: 608.261.1112  
 WWW.WELLMANARCHITECTS.COM

**INSITE ARCHITECTS**  
 1125 N. MONROE  
 MADISON, WISCONSIN 53704  
 TEL: 608.261.1111  
 FAX: 608.261.1112  
 WWW.INSITEARCHITECTS.COM

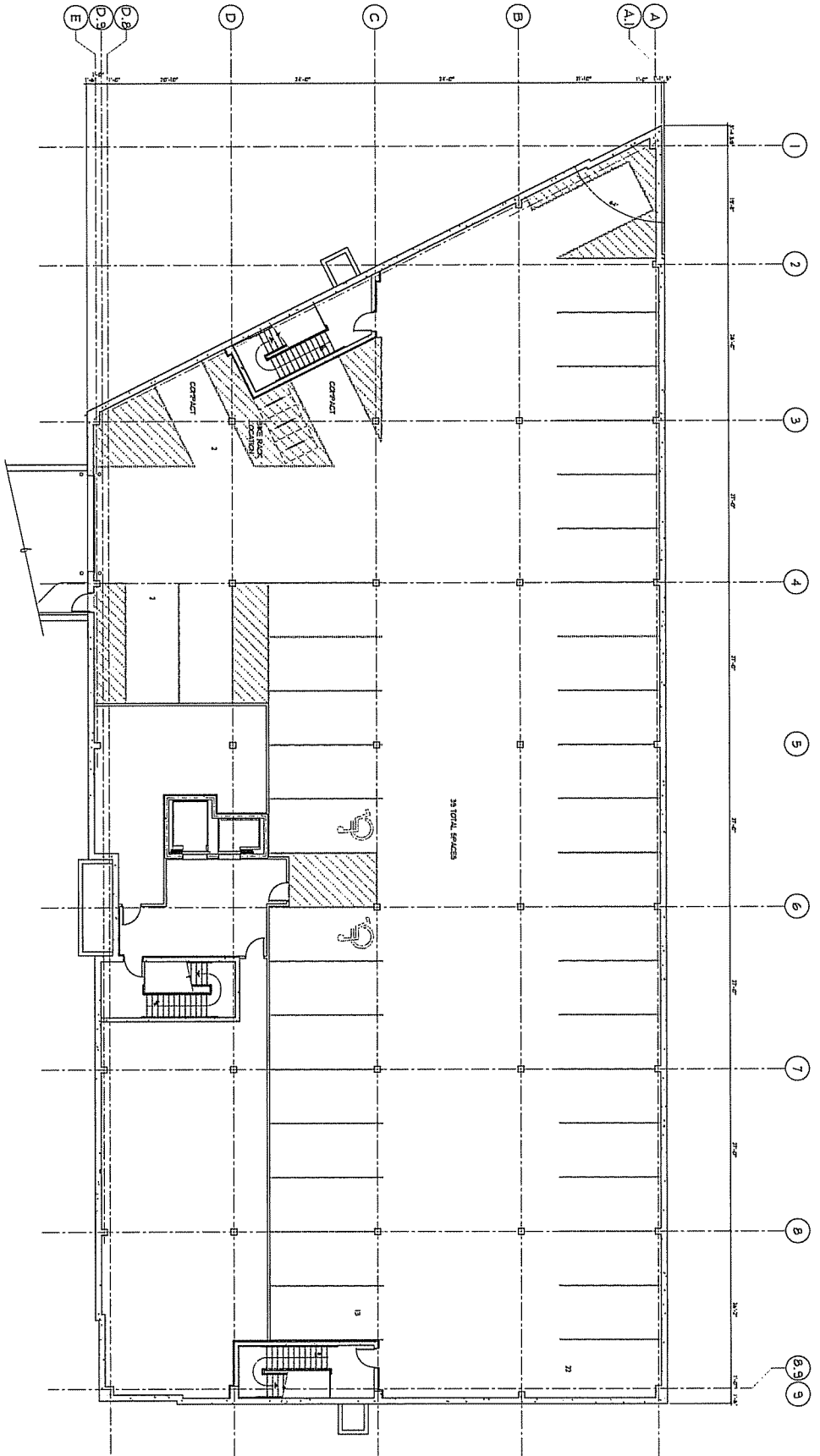
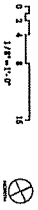
**MADISON PAIN MANAGEMENT**  
 27036  
 07-14-07

**DESIGNER:**  
 WELLMAN ARCHITECTS  
 AND INSITE ARCHITECTS

**SCALE:**  
 A0.3

MADISON PAIN MANAGEMENT

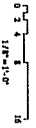
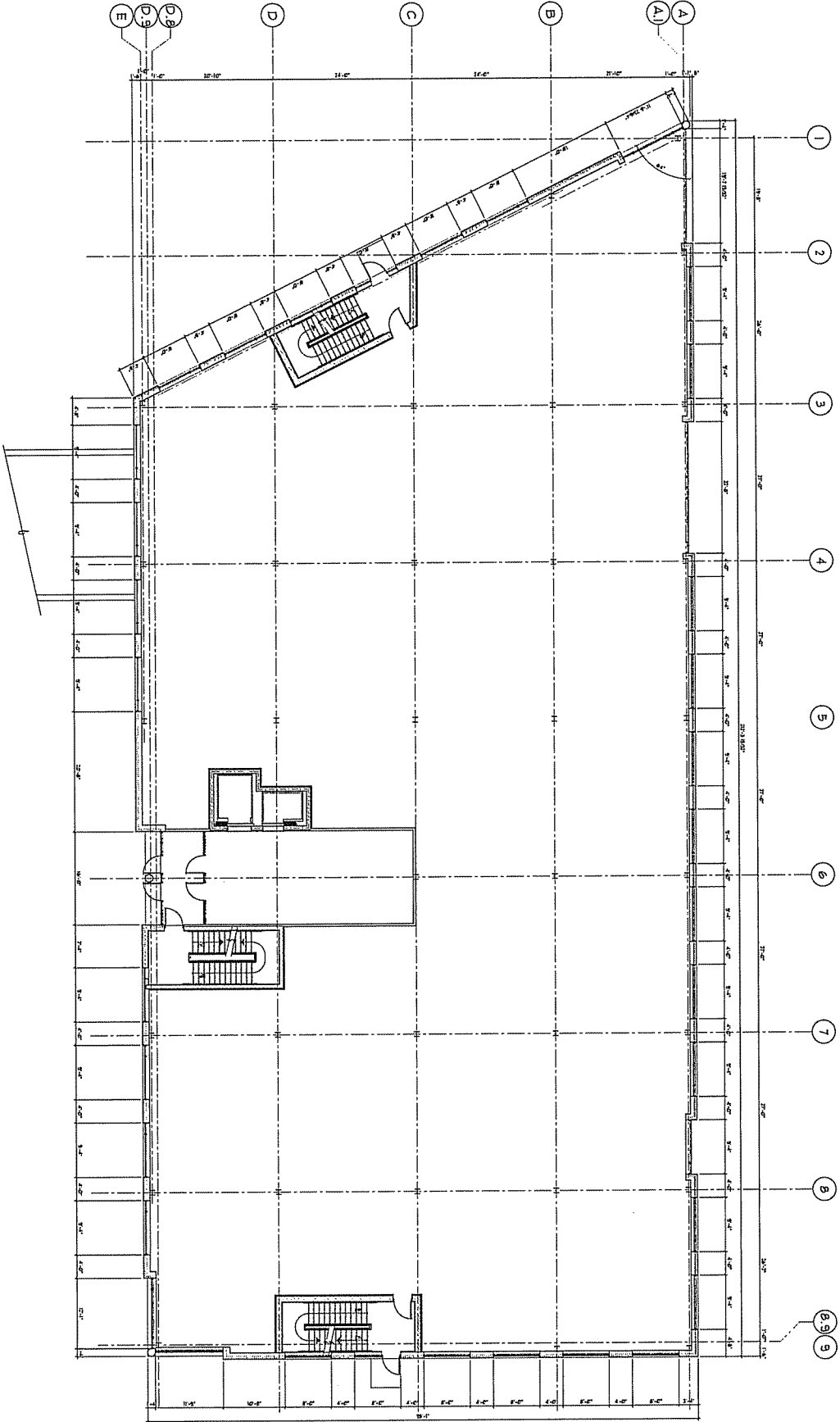
BASMENT PLAN



ARCHITECT  
MADISON PAIN MANAGEMENT  
300 N. KATE  
MADISON, WI 53703  
CONTACT THE ARCHITECT AT 608.261.1111

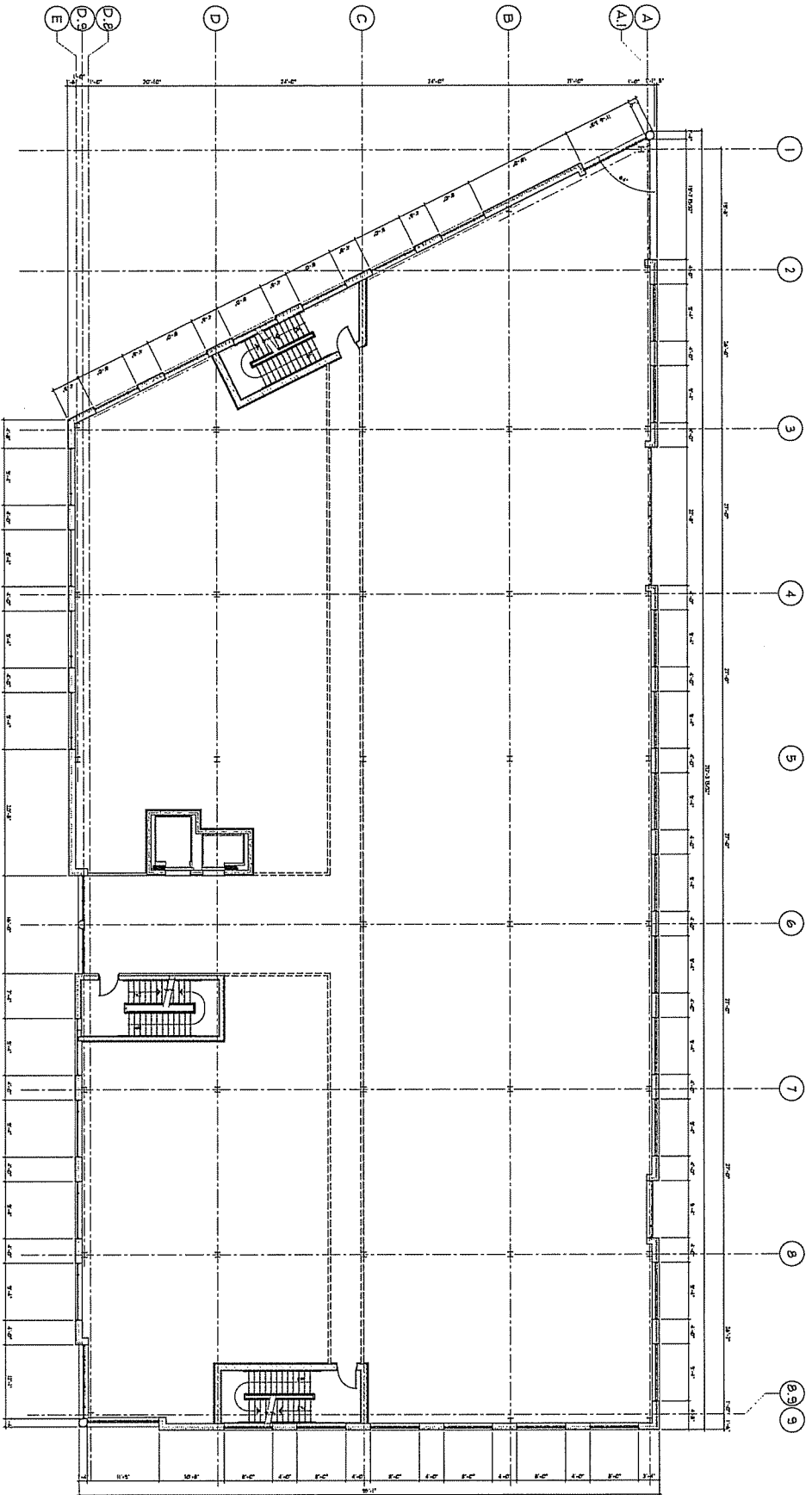
MADISON PAIN MANAGEMENT

FIRST FLOOR PLAN



MADISON PAIN MANAGEMENT

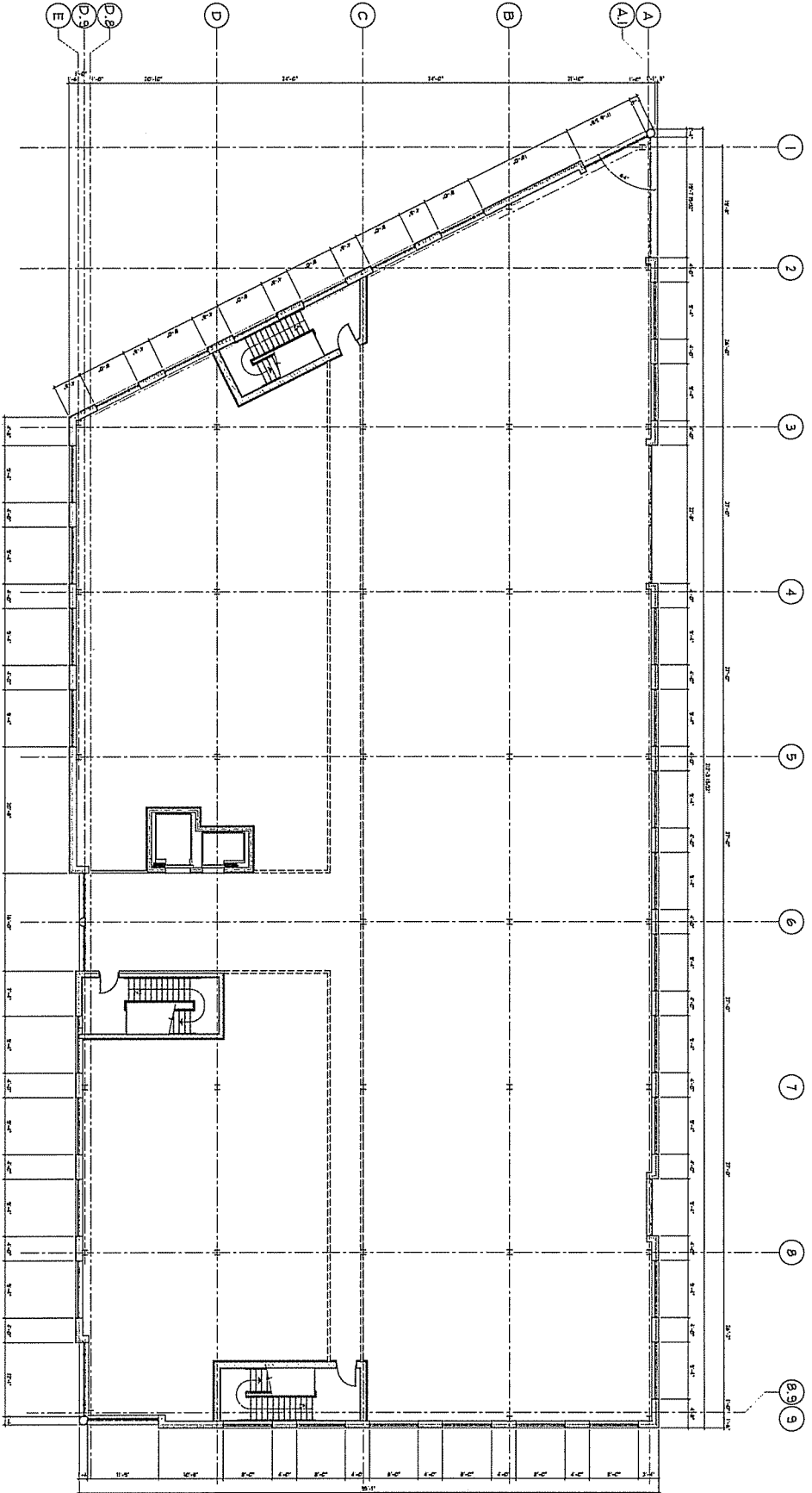
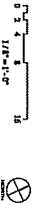
SECOND FLOOR PLAN



MADISON PAIN MANAGEMENT  
 ARCHITECTURE  
 1000 N. 10TH ST.  
 SUITE 100  
 MADISON, WI 53706  
 608.261.1111  
 WWW.MADISONPAINMANAGEMENT.COM

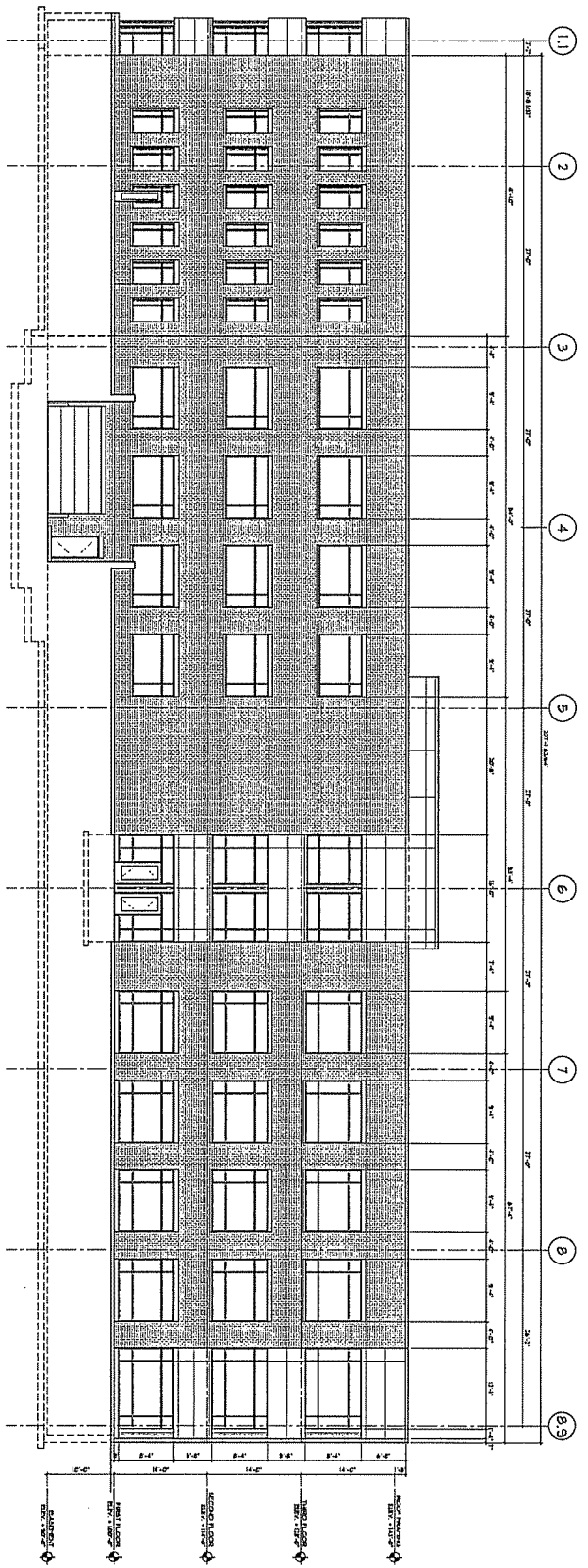
MADISON PAIN MANAGEMENT

THIRD FLOOR PLAN

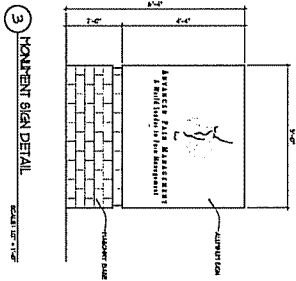


ARCHITECT  
 1000 PINE STREET  
 SUITE 1000  
 DENVER, COLORADO 80202  
 303.733.1111  
 WWW.AIAAIA.COM

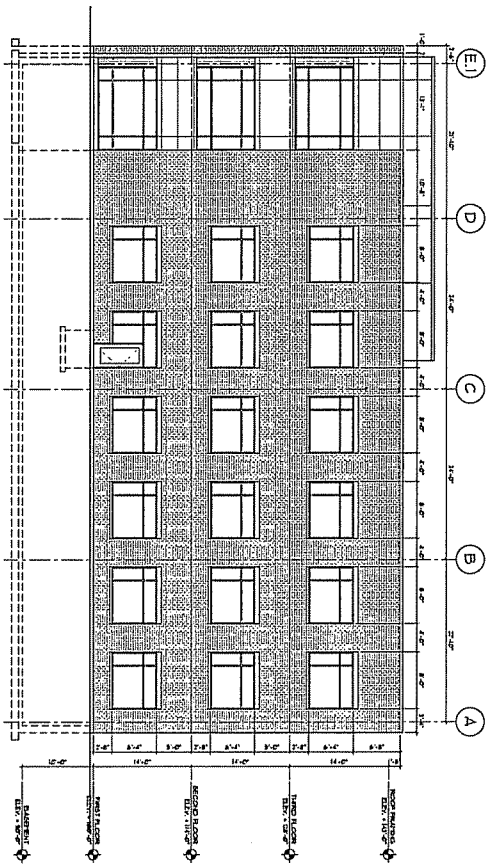
CONSTRUCTION MANAGEMENT



1 SOUTH ELEVATION  
SCALE: 1/8" = 1'-0"



3 HORIZONTAL SIGN DETAIL  
SCALE: 1/8" = 1'-0"

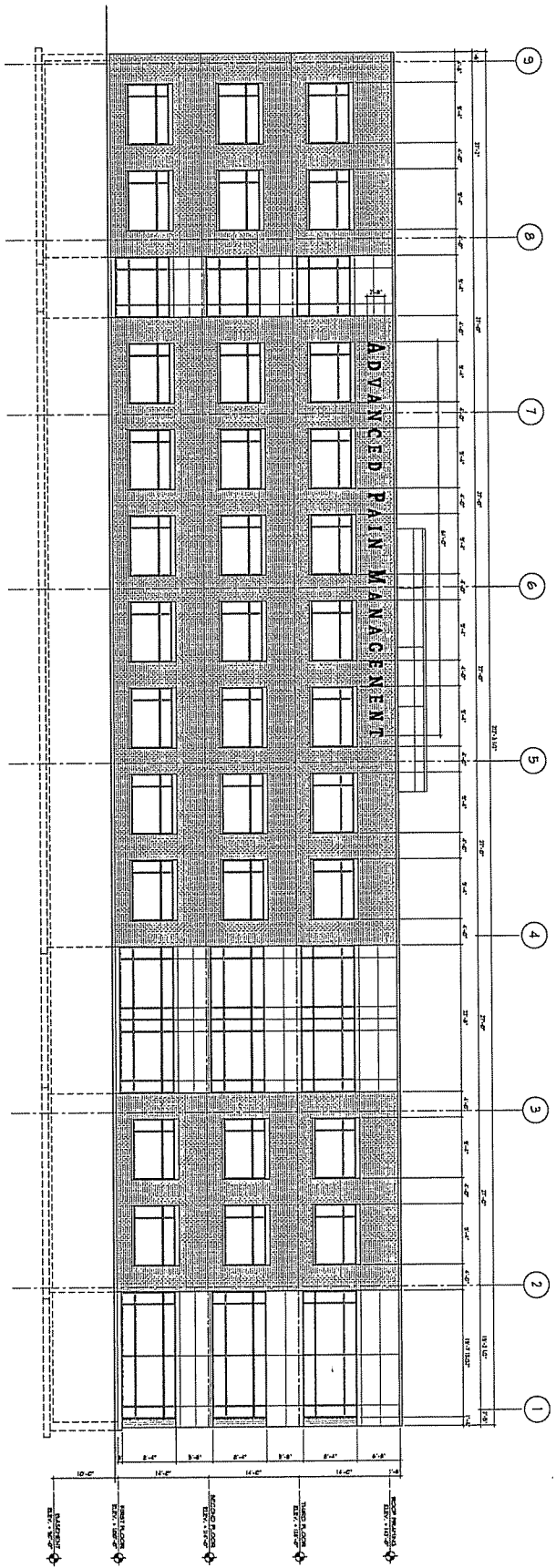


2 EAST ELEVATION  
SCALE: 1/8" = 1'-0"

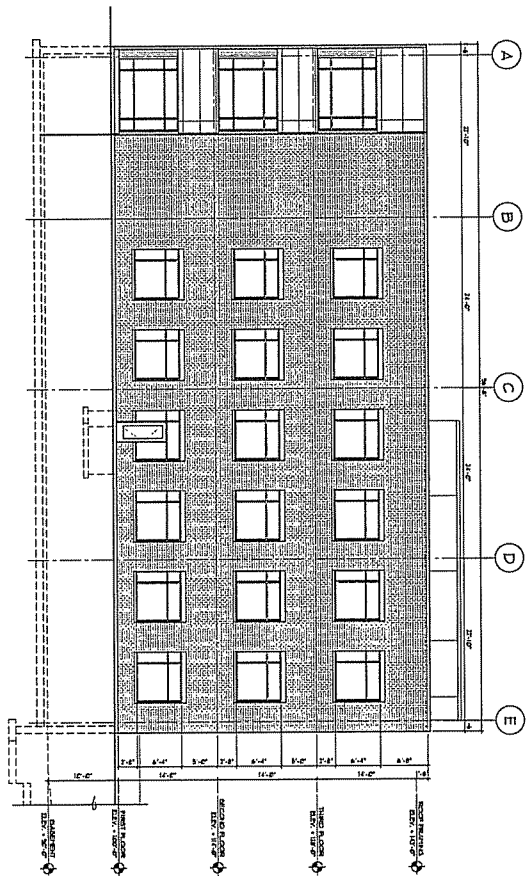
ELEVATIONS

MADISON PAIN MANAGEMENT





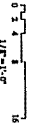
1 NORTH ELEVATION



2 WEST ELEVATION

ELEVATIONS

MADISON PAIN MANAGEMENT









EAST SIDE



NORTH SIDE



WEST SIDE