LAND USE APPLICATION - INSTRUCTIONS & FORM

City of Madison Planning Division Madison Municipal Building, Suite 017 215 Martin Luther King, Jr. Blvd. P.O. Box 2985 Madison, WI 53701-2985 (608) 266-4635



FOR OFFICE USE ONLY:	
2/10/25 3:51 p.m.	_
Date Received	

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LI Initial Submittal

Revised Submittal

All Land Use Applications must be filed with the Zoning Office. Please see the revised submittal instructions on Page 1 of this document.

This completed form is required for all applications for Plan Commission review except subdivisions or land divisions, which should be filed using the <u>Subdivision Application</u>. If your project requires both Land Use <u>and</u> Urban Design Commission (UDC) submittals, a completed <u>UDC Application</u> and accompanying submittal materials are also required to be submitted.

If you need an interpreter, translator, materials in alternate formats or other accommodations to access these forms, please call the Planning Division at (608) 266-4635.

Si necesita interprete, traductor, materiales en diferentes formatos, u otro tipo de ayuda para acceder a estos formularios, por favor llarne al (608) 266-4635.

Yog tias koj xav tau ib tug neeg txhais lus, tus neeg txhais ntawv, los sis xav tau cov ntaub ntawv uo lwm hom ntawv los sis lwm cov kev pab kom paub txog cov lus qhia no, thov hu rau Koog Npaj (Planning Division) (608) 266-4635.

APPLICATION FORM

1. Project Information

Address (list all addresses on the project site): 306 N Brooks Street

Title:

2. This is an application for (check all that apply)

- Zoning Map Amendment (Rezoning) from ______ to ______ to ______
- Major Amendment to an Approved Planned Development General Development Plan (PD-GDP)
- Major Amendment to an Approved Planned Development Specific Implementation Plan (PD-SIP)
- Review of Alteration to Planned Development (PD) (by Plan Commission)
- Conditional Use or Major Alteration to an Approved Conditional Use
- Demolition Permit Other requests _____

3. Applicant, Agent, and Property Owner Information

Applicant name	John Leja	Company LZ Ventures				
Street address	8301 Machine Drive, Suite 102	City/State/Zip Madison, WI 53717				
Telephone	608-831-3326	Email jleja@me.com				
Project contact person Duane Johnson		Company Knothe & Bruce Architects				
Street address	8401 Greenway Blvd. Ste 900	City/State/Zip Middleton, WI 53562				
Telephone	608-836-3690	Email djohnson@knothebruce.com				
Property owner (if not applicant)						
Street address		City/State/Zip				
Telephone		Email				

APPLICATION FORM (CONTINUED)

5. Project Description

Thi	vide a brief description of the pro s project consists of demolishing the using building with 189 units and 512 ls.	current existing buildir	ng at 306	N. Brooks St.					
Pro	posed Square-Footages by Type:								
	Overall (gross), 299,356	Commercial (net)	:		Office (net)	fice (net):			
Overall (gross): 299,356		Industrial (net): _			Institution	Institutional (net):			
Pro	posed Dwelling Units by Type (if	proposing more that	an 8 unit	s):					
	Efficiency: <u>8</u> 1-Bedroom: <u>14</u>	2-Bedroom:_ ⁵⁶	3-Be	droom: <u>74</u>	4 Bedroor	n: <u>29</u>	_ 5-Bedroom: <u>9</u>		
	Density (dwelling units per acre):	242	Lot Area	a (in square f	eet&acres):	34,269 S	F / .78 acres		
Pro	posed On-Site Automobile Parki	ng Stalls by Type (<i>if</i>	applicat	ole):					
	Surface Stalls: <u>11</u> Under-Buildi	ng/Structured: 102	Electri						
Pro	posed On-Site Bicycle Parking Sta	alls by Type (if appli	cable):	¹ See <u>Sect</u>	ion 28.141(8)	(e), MGO	for more information		
	Indoor (long-term): 286 Outd	oor (short-t e rm): <u>63</u>	}						
Sch	eduled Start Date: December 2025	5	Plan	ned Comple	tion Date: Ju	une 2027			
	plicant Declarations								
	Pre-application meeting with staf the proposed development and re			•••	•••		-		
	Planning staff Chris Wells				Date	1/10/25			
	Zoning staff Kirchgatter	ÿ			Date	1/10/25			
	Posted notice of the proposed dem	olition on the <u>City's De</u>	molition	Listserv (if app	licable). Date	Posted			
	Public subsidy is being requeste	d (indicate in l e tter	of inten	:)					
	District Alder Alder MGR Govinda	irajan			Dat e	2/3/25			
	Neighborhood Association(s) Ca	mpus Area Neighbort	nood Ass	ociation	Date	2/3/25			
	Business Association(s) Greater	State Street Business	Associati	on	Date	2/3/25			
The a	oplicant attests that this form is a	accurately complete	ed and a	ll required r	naterials are	submitt	ed:		
Name	of applicant <u>John Leja</u>			Relationshi	p to property	Owne	er		
Author	izing signature of property owner	John J Leja ohn J Leja (Feb 10, 2025 12:41 PST)			Date	2/20	/25		