LAND USE APPLICATION - INSTRUCTIONS & FORM

LND-A

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:
Paid $600 Receipt # 94061-0005
Date received 8/8/19
Received by JLK

☒ Original Submittal ☐ Revised Submittal

Parcel # _____

Aldermanic District _____

Zoning District _____

Special Requirements _____

Review required by _____

☐ UDC ☐ PC
☐ Common Council ☐ Other _____

Reviewed By _____

All Land Use Applications must be filed with the Zoning Office at the above address.

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. (http://www.cityofmadison.com/development-services-center/documents/SubdivisionApplication.pdf)

APPLICATION FORM

1. Project Information

Address: 3230 LAWSON RD, MADISON WI 53711 (TOWN OF BLOOMING GROVE)

Title: BARNWOOD EVENTS WI, LLC

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

☐ Zoning Map Amendment (Rezoning) from _____ to _____
☐ Major Amendment to an Approved Planned Development-General Development Plan (PD-GDP) Zoning
☐ 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 DAVID D WOOD Company OWNER
Street address 3230 LAWSON RD City/State/Zip MADISON WI 53711
Telephone 608.442.9000 Email DAVE@APPLEWOODSTORAGE.COM

Project contact person _____ Company _____
Street address _____ City/State/Zip _____
Telephone _____ Email _____

Property owner (if not applicant) _____
Street address _____ City/State/Zip _____
Telephone _____ Email _____

APPLICATION FORM (CONTINUED)

5. Project Description

Provide a brief description of the project and all proposed uses of the site:

SPECIAL EVENT CENTER

Proposed Dwelling Units by Type (if proposing more than 8 units):

Efficiency:_____ 1-Bedroom:_____ 2-Bedroom:_____ 3-Bedroom:_____ 4+ Bedroom: _____

Density (dwelling units per acre): _____ Lot Size (in square feet & acres): 80'x80'

Proposed On-Site Automobile Parking Stalls by Type (*if applicable*):

Surface Stalls: 145 Under-Building/Structured: _____

Proposed On-Site Bicycle Parking Stalls by Type (*if applicable*):

Indoor: NONE Outdoor: 6

Scheduled Start Date: OCT 2019 Planned Completion Date: SPRING 2020

6. Applicant Declarations

☐ **Pre-application meeting with staff.** Prior to preparation of this application, the applicant is strongly encouraged to discuss the proposed development and review process with Zoning and Planning Division staff. Note staff persons and date.

Planning staff TIM PARKS Date 8/8/19

Zoning staff JENNY KIRCHGATER Date 8/8/19

☐ **Demolition Listserv** (https://www.cityofmadison.com/developmentCenter/demolitionNotification/notificationForm.cfm).

☐ Public subsidy is being requested (indicate in letter of intent)

☐ **Pre-application notification**: The zoning code requires that the applicant notify the district alder and all applicable neighborhood and business associations **in writing no later than 30 days prior to FILING this request**. Evidence of the pre-application notification or any correspondence granting a waiver is required. List the alderperson, neighborhood association(s), business association(s), AND the dates notices were sent.

District Alder _____ Date _____

Neighborhood Association(s) _____ Date _____

Business Association(s) _____ Date _____

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

Name of applicant DAVE WOOD Relationship to property OWNER

Authorizing signature of property owner [signature] Date 8/8/19