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:		
Date Received2/24/25 11:40 a.m.		Initial Submittal
	Paid	Revised Submitta

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 llame al (608) 266-4635.

Yog tias koj xav tau ib tug neeg txhais lus, tus neeg txhais ntawy, los sis xav tau cov ntaub ntawv ua 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	t site):
Title:	
2. This is an application for (check all	that apply)
Zoning Map Amendment (Rezonir	ng) from to
Major Amendment to an Approve Review of Alteration to Planned D Conditional Use or Major Alteration	ed Planned Development - General Development Plan (PD-GDP) ed Planned Development - Specific Implementation Plan (PD-SIP) Development (PD) (by Plan Commission) on to an Approved Conditional Use er requests
2 Applicant Agent and Dropouts Ou	
3. Applicant, Agent, and Property Ow Applicant name	Company
	City/State/Zip
	Email
Project contact person	Company
Street address	City/State/Zip
Telephone	Email
Property owner (if not applicant)	
Street address	City/State/Zip

Telephone

LAND USE APPLICATION - INSTRUCTIONS & FORM



APPLICATION FORM (CONTINUED)

	vide a brief description of the printerior RENOVATION OF AN EXISTIN			THE FACILITY WILL HAVE	10 COURTS
VEI	NDING/CONCESSCION AREA, AND A PRO	D-SHOP. OTHER SPACES	WILL INCLUDE OFFICE A	ND SMALL CONFERENCE	ROOM.
Pro	posed Square-Footages by Type	:			
	Overall (gross): 26,142			Office (net): 344 Institutional (net	:):
Pro	posed Dwelling Units by Type (i	f proposing more th	an 8 units):		
	Efficiency: 1-Bedroom:_	2-Bedroom:	3-Bedroom:	4 Bedroom:	5-Bedroom:
	Density (dwelling units per acre)		_ Lot Area (in square	e feet & acres):	
Pro	posed On-Site Automobile Park	ing Stalls by Type (ij	f applicable):		
	Surface Stalls: 65 Under-Build	ing/Structured: o	Electric Vehicle-re	eady¹: Electric	Vehicle-installed¹:
Pro	posed On-Site Bicycle Parking S	talls by Type (if app	licable): ¹ See <u>Se</u>	ction 28.141(8)(e), M	GO for more information
	Indoor (long-term): 0 Out	door (short-term): $\frac{1}{2}$	4		
Sch	cheduled Start Date: April 2025 Planned Completion Date: September 2025		er 2025		
6. Ap	plicant Declarations				
Ø	Pre-application meeting with state the proposed development and				
	Planning staff Lisa McNabola		Date <u>2/20/</u>	Date 2/20/2025	
	Zoning staff			Date <u>2/20/</u>	2025
	Posted notice of the proposed der				
	Public subsidy is being request				
Ø	Pre-application notification : The neighborhood and business as of the pre-application notification neighborhood association(s), but the neighborhood association(s), but the neighborhood association(s), but the neighborhood association(s) and the neighborhood association(s).	ne zoning code requ sociations <u>in writing</u> tion or any corresp	ires that the applica g no later than 30 condence granting	days prior to FILING a waiver is required	this request. Evidence
	District Alder Jael Currie; District 1	.6	The state of the s	Date <u>2/202</u>	2025
	Neighborhood Association(s)	/A	***************************************	Date	
	Business Association(s) N/A			Date	
The a	pplicant attests that this form is	accurately complet	ted and all required	l materials are subn	nitted:
	Don't Naviganal	1			
lame	of applicant Bret Newcomb		Relations	hip to property <u>Buildi</u>	ng Owner