

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:

Date Received 5/14/26 3:07 p.m.

Initial Submittal

Paid _____

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.

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.

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](#). If your project requires both Land Use and Urban Design Commission (UDC) submittals, a completed [UDC Application](#) and accompanying submittal materials are also required to be submitted.

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 ntawv, los sis xav tau cov ntaub ntawv ua lwm horn 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):

1336 DRAKE ST. MADISON WI 53715

Title: _____

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)
- 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 ROBERT SHAPIRO Company SAMMY AZIZ LLC DBA ZUZU CAFE
Street address 217 S. ORCHARD ST City/State/Zip MADISON WI 53715
Telephone 608. 233-0044 Em [REDACTED]

Project contact person SAME 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:

OCCASIONAL MUSIC OUTSIDE ON OUR PATIO USING A MINIMAL SOUND SYSTEM ONLY FOR INDIVIDUAL INSTRUMENTS

Proposed Square-Footages by Type:

Overall (gross): 5412 sq. FT. Commercial (net): 5412 sq. FT. Office (net): Industrial (net): Institutional (net):

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

Efficiency: 1-Bedroom: 2-Bedroom: 3-Bedroom: 4 Bedroom: 5-Bedroom: Density (dwelling units per acre): Lot Area (in square feet & acres):

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

Surface Stalls: Under-Building/Structured: Electric Vehicle-ready: Electric Vehicle-installed:

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

See Section 28.141(8)(e), MGO for more information

Indoor (long-term): Outdoor (short-term): 8

Scheduled Start Date: ASAP Planned Completion Date:

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 COLIN PUNT Date 5/7/26 Zoning staff JENNY KIRCHGATTER Date 5/7/26

Posted notice of the proposed demolition on the City's Demolition Listserv (if applicable). Date Posted

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 TAG EVERS Date 5/11/26 Neighborhood Association(s) GREENBUSH NEIGHBORHOOD Date 5/11/26 Business Association(s) Date

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

Name of applicant ROBERT SHAPIRO Relationship to property OWNER Authorizing signature of property owner Robert Shapiro Date 5/11/26