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 Received3/14/25 11:09 a.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.

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. 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)

Yog tias koj xav tau ib tug neeg txhais lus, tus neeg txhais ntawv, 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 site):								
·	1522 Waunona Way, Madison, WI							
	1322 Wadnona Way, Madison, Wi							
Title: Wareing Residence								
2. This is an application for (check all that apply)								
		to						
•								
Review of Alteration to Planned Development (PD) (by Plan Commission)								
✓ Conditional Use or Major Alteration to an Approved Conditional Use								
■ Demolition Per	rmit							
3. Applicant, Agent, and Property Owner Information								
Applicant name		Company Classic Custom Homes of Waunakee, Inc						
Street address	401 N Century Ave	_ City/State/Zip						
Telephone	608-850-4450	Email kristi@cchofwaunakee.com						
Project contact per	rson Bryan Sipple	Company Classic Custom Homes of Waunakee, Inc						
Street address	401 N Century Ave	City/State/Zip Waunakee, WI 53597						
Telephone	608-513-3351	Email bryan@cchofwaunakee.com						
Property owner (if not applicant) Scott & Sandy Wareing								
Street address	1522 Waunona Way	City/State/Zip Madison, WI 53713						
Telephone	608-215-9596	Email scott_wareing@yahoo.com; sandy_wareing@yahoo.com						

Telephone

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APPL	ICATION FORM (CONTINUED)					
5. Pr	oject Description					
Pro	vide a brief description of the pro	eject and all proposed	uses of the site:			
Der	molition of existing residence to be repla	ced by a new single family	residence			
Pro	posed Square-Footages by Type:					
	Overall (gross): 4,202sf	Commercial (net): Industrial (net):			 :	
Pro	posed Dwelling Units by Type (if	proposing more than	8 units):			
	Efficiency: 1-Bedroom:	2-Bedroom:	_ 3-Bedroom:	4 Bedroom:	5-Bedroom:	
Der	nsity (dwelling units per acre):	Lot A	rea (in square feet	& acres): ^{21,830}		
Pro	posed On-Site Automobile Parki	ng Stalls by Type (if a_l	oplicable):			
	Surface Stalls: Under-Buildi	ng/Structured:	Electric Vehicle-rea	dy¹: Electric V	ehicle-installed¹:	
Pro	posed On-Site Bicycle Parking St	alls by Type (if applica	<i>able</i>): ¹ See <u>Secti</u>	on 28.141(8)(e), MG	O for more information	
	Indoor (long-term): Outd	oor (short-term):				
Sch	eduled Start Date: April 15, 2025		Planned Comple	tion Date: 10/1/25		
	pplicant Declarations		•			
Ø	Pre-application meeting with star the proposed development and r					
	Planning staff Colin Punt & Heathe	r Bailey		Date ^{3/10/2}	5	
	Zoning staff Jenny					
Ø	Posted notice of the proposed dem					
_						
Ø						
	District Alder Isadore Knox Jr Dist					
	Neighborhood Association(s) W					
	Business Association(s) South Mo	etropolitan Business Assoc ———————————————————————————————————	iation	Date <u>3/6/25</u> 3/11/	25	
The a	pplicant attests that this form is			· ·		
THE a	pplicant attests that this form is	accurately completed	i and an required r	naterials are submi	tteu.	
Name	of applicant Kristi Hills	— Signed by:	Relationshi	p to property Contra	ctor	
Autho	rizing signature of property owner			Date	4/2025	