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 Received	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 <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.

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A	PPLICATION FORM	Л					
1.	Project Informati						
	6213 Cou	ddress (list all addresses on the project site): 2213 Country Side Lane, Madison W1 53705 tle: Countryside Lane Demolition Project					
2.	2. This is an application for (check all that apply)						
	☐ Zoning Map A	mendment (Rezoning) from	to				
	□ Major Amenda□ Review of Alter	r Amendment to an Approved Planned Development - General Development Plan (PD-GDP) r Amendment to an Approved Planned Development - Specific Implementation Plan (PD-SIP) w of Alteration to Planned Development (PD) (by Plan Commission) itional Use or Major Alteration to an Approved Conditional Use Dilition Permit					
3.	Applicant, Agent,	and Property Owner Information					
	Applicant name	Brent Montry	Company Tri State Basement Repair Inc.				
	Street address	27188 US Hwy 14	City/State/Zip Richland Center WI 53581				
	Telephone	608-647-4158	Email info@tsbrinc.com				
	Street address Telephone	not applicant) Bill and Angela Furhmann	Company City/State/Zip Email				
	Street address	6212 Countryside Lane	City/State/Zip Madison WI 53705				
	Telephone	608-279-5428	Email billfuhrmann68@gmail.com				

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APPL	ICATION FORM (CONTINUED)						
5. Pro	oject Description						
	ovide a brief description of the project and all proposed uses of the site: emolition of house and garage for rebuild						
Pro	Proposed Square-Footages by Type:						
	Commercial (net): Offic	e (net):					
	Overall (gross):	tutional (net):					
Proposed Dwelling Units by Type (if proposing more than 8 units):							
	Efficiency: 1-Bedroom: 2-Bedroom: 3-Bedroom: 4 Be	edroom: 5-Bedroom:					
	Density (dwelling units per acre): Lot Area (in square feet & a	cres):					
Proposed On-Site Automobile Parking Stalls by Type (if applicable):							
	Surface Stalls: Under-Building/Structured: Electric Vehicle-ready¹:						
Pro	oosed On-Site Bicycle Parking Stalls by Type (if applicable):	141(8)(e), MGO for more information					
	Indoor (long-term): Outdoor (short-term):						
Sch	eduled Start Date: Feb 17, 2025 Planned Completion D	ate: March 7, 2625					
6. Ap	plicant Declarations						
 ✓	Pre-application meeting with staff . Prior to preparation of this application, the applicant is strongly encourage the proposed development and review process with Zoning and Planning Division staff. Note staff persons						
	Planning staff Colin Punt	Date 9/5/2024					
	Zoning staff Jenny Kirchgapter						
V							
Ø	Pre-application notification : The zoning code requires that the applicant notify neighborhood and business associations in writing no later than 30 days prior of the pre-application notification or any correspondence granting a waive neighborhood association(s), business association(s), AND the dates notices we	or to FILING this request. Evidence is required. List the alderperson,					
	District Alder John Guequierre	Date 9/6/2024					
	Neighborhood Association(s) Valerie L. Bailey-Rihn						
	Business Association(s) N/A	_ Date N/A					
The a	oplicant attests that this form is accurately completed and all required materia	als are submitted:					
	Name of applicant Brent Montry Relationship to property Contractor						
Authorizing signature of property owner Angela Mack Date 12/10/24							