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 UNLY.		
Date Received10/21/24 10:22 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 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):			
Title:			
2. This is an application for (check all that apply)			
Zoning Map Amendment (Rezoning) from to to			
Major Amendment to an Approved Planned Development - General Development Plan (PD-GDP)			
Major Amendment to an Approved Planned Develop	oment - 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	Company		
Street address	City/State/Zip		
Telephone	Email		
Project contact person	Company		
Street address	City/State/Zip		
Telephone	Email		
Property owner (if not applicant)			
	City/State/Zip		

Telephone

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APPLICATION FORM (CONTINUED)				
5. Project Description				
Provide a brief description of the	project and all proposed	I uses of the site:		
Proposed Square-Footages by Ty				
	Common a mai al (m at).	Of	fice (net):	
Overall (gross):	Industrial (net):	Oi	stitutional (net):	
			stitutional (net).	
Proposed Dwelling Units by Type			Dadas and E Dadas and	
			Bedroom: 5-Bedroom:	
			& acres):	
Proposed On-Site Automobile Pa				
Surface Stalls: Under-Bu	ilding/Structured:		Electric Vehicle-installed	
Proposed On-Site Bicycle Parking	Stalls by Type (if applied	able):	<u>(8.141(8)(e), MGO</u> for more infor	mation
Indoor (long-term): Ou	utdoor (short-term):			
Scheduled Start Date:		_ Planned Completion	Date:	
6. Applicant Declarations				
• • • • • • • • • • • • • • • • • • • •	• •	• • • • • •	oplicant is strongly encouraged to on staff. Note staff persons and d	
Planning staff			Date	
Zoning staff			Date	
Posted notice of the proposed d	emolition on the <u>City's Den</u>	nolition Listserv (if applicab	le). Date Posted	
Public subsidy is being reque	sted (indicate in letter o	f intent)		
neighborhood and business	associations in writing I cation or any correspond	no later than 30 days produced granting a wair	tify the district alder and all apported to the control of the con	vidence
District Alder			Date	
Neighborhood Association(s))		Date	
Business Association(s)			Date	
The applicant attests that this form	is accurately completed	d and all required mate	erials are submitted:	
Name of applicant		Relationship to	property	
Authorizing signature of property ow				