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 ____5/12/25 11:55 a.m.

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Initial Submittal

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 estas 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 ______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 UseDemolition PermitOther 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)	
Street address	City/State/Zip
Telephone	Email

LAND USE APPLICATION - INSTRUCTIONS & FORM

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APPLICATION FORM (CONTINUED)

5. Project Description

Provide a brief description of the project and all proposed uses of the site:

Proposed Square-Footages by 1	Гуре:			
Querall (groce);	Commercial (net	t):	Office (net):	
Overall (gross): Industria			Institutional (ne	t):
Proposed Dwelling Units by Typ	pe (if proposing more th	nan 8 units):		
Efficiency: 1-Bedroon	m: 2-Bedroom:	3-Bedroom:	4 Bedroom:	5-Bedroom:
Density (dwelling units per a	cre):	_ Lot Area (in square feet & acres):		
Proposed On-Site Automobile I	Parking Stalls by Type (i	f applicable):		
Surface Stalls: Under-F	Building/Structured:			
Proposed On-Site Bicycle Parkin	ng Stalls by Type (if app	licable): ¹ See <u>Se</u>	ection 28.141(8)(e), M	<u>GO</u> for more information
Indoor (long-term):	Outdoor (short-term): _			
Scheduled Start Date:	cheduled Start Date: Planned Completion Date:			
. Applicant Declarations				
Pre-application meeting wit the proposed development	• •	••		
Planning staff			Date	
Planning staff Zoning staff				
			Date	
Zoning staff	d demolition on the <u>City's D</u>	Demolition Listserv (if a	Date	
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