



Location  
7514 Whitacre Road

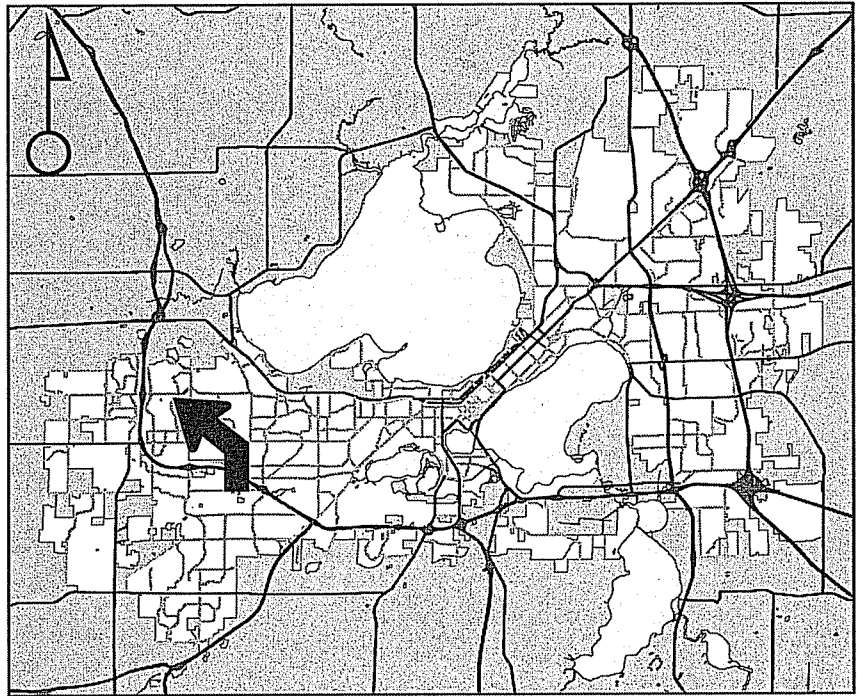
Project Name  
Bloom Employee

Applicant  
Paul S. Bloom, DC

Existing Use  
Single Family House

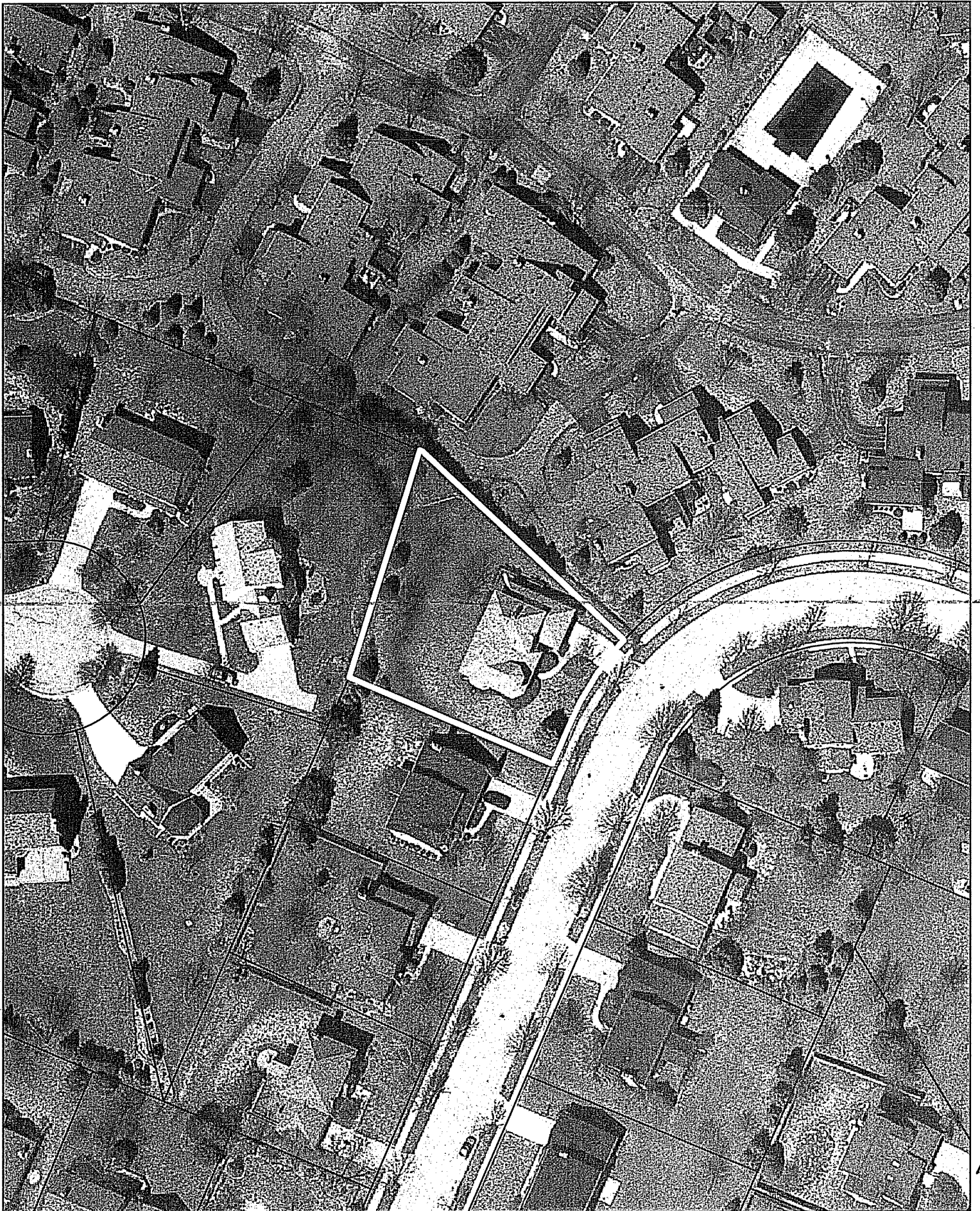
Proposed Use  
Employee in Home Office

Public Hearing Date  
Plan Commission  
09 April 2007



For Questions Contact: Brian Grady at: 261-9980 or [bgrady@cityofmadison.com](mailto:bgrady@cityofmadison.com) or City Planning at 266-4635





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# LAND USE APPLICATION Madison Plan Commission

215 Martin Luther King Jr. Blvd; Room LL-100  
PO Box 2985; Madison, Wisconsin 53701-2985  
Phone: 608.266.4635 | Facsimile: 608.267.8739

- The following information is required for all applications for Plan Commission review.
- Please read all pages of the application completely and fill in all required fields.
- This application form may also be completed online at [www.cityofmadison.com/planning/plan.html](http://www.cityofmadison.com/planning/plan.html)
- All zoning application packages should be filed directly with the Zoning Administrator's desk.
- All applications will be reviewed against the applicable standards found in the City Ordinances to determine if the project can be approved.

<b>FOR OFFICE USE ONLY:</b>	
Amt. Paid <u>\$ 580<sup>00</sup></u>	Receipt No. <u>78894</u>
Date Received <u>2-8-07</u>	
Received By <u>RT</u>	
Parcel No. <u>0708-232-0317-3</u>	
Aldermanic District <u>9, Paul Skidmore</u>	
GQ <u>OK!</u>	
Zoning District <u>R1</u>	
<b>For Complete Submittal</b>	
Application <input checked="" type="checkbox"/>	Letter of Intent <input checked="" type="checkbox"/>
IDUP <u>NA</u>	Legal Descript. <input checked="" type="checkbox"/>
Plan Sets <input checked="" type="checkbox"/>	Zoning Text <u>NA</u>
Alder Notification <input checked="" type="checkbox"/>	Waiver _____
Nbrhd. Assn Not. <input checked="" type="checkbox"/>	Waiver _____
Date Sign Issued _____	

1. **Project Address:** 7514 Whitacre Road **Project Area in Acres:** \_\_\_\_\_

**Project Title (if any):** None

2. **This is an application for:** (check at least one)

<input checked="" type="checkbox"/> <b>Zoning Map Amendment</b> (check only ONE box below for rezoning and fill in the blanks accordingly)			
<input type="checkbox"/> Rezoning from _____ to _____	<input type="checkbox"/> Rezoning from _____ to PUD/PCD-SIP		
<input type="checkbox"/> Rezoning from _____ to PUD/PCD-GDP	<input type="checkbox"/> Rezoning from PUD/PCD-GDP to PUD/PCD-SIP		
<input checked="" type="checkbox"/> <b>Conditional Use</b>	<input type="checkbox"/> <b>Demolition Permit</b>	<input type="checkbox"/> <b>Other Requests</b> (Specify): _____	

**3. Applicant, Agent & Property Owner Information:**

Applicant's Name: Paul S. Bloom, DC Company: \_\_\_\_\_  
 Street Address: 7514 Whitacre Road City/State: Madison, WI Zip: 53717  
 Telephone: (608) 770-7514 Fax: (608) 833-3368 Email: losbloom@chorus.net

Project Contact Person: same as above Company: \_\_\_\_\_  
 Street Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Property Owner (if not applicant): same as above  
 Street Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

**4. Project Information:**

Provide a general description of the project and all proposed uses of the site: This is a single family home in which I maintain a professional home office. (I work as a chiropractor.) I am applying for a CUP to allow my secretary to work with me in my home office.

Development Schedule: Commencement \_\_\_\_\_ Completion \_\_\_\_\_

Zoning and Planning staff determined that the attached floor plan is the only site plan needed for this application.

**5. Required Submittals:**

- Site Plans** submitted as follows below and depicts all lot lines; existing, altered, demolished or proposed buildings; parking areas and driveways; sidewalks; location of any new signs; existing and proposed utility locations; building elevations and floor plans; landscaping, and a development schedule describing pertinent project details:
  - **Seven (7) copies** of a full-sized plan set drawn to a scale of one inch equals 20 feet (collated and folded)
  - **Seven (7) copies** of the plan set reduced to fit onto 11 inch by 17 inch paper (collated, stapled and folded)
  - **One (1) copy** of the plan set reduced to fit onto 8 1/2 inch by 11 inch paper
- Letter of Intent: Twelve (12) copies** describing this application in detail but not limited to, including: existing conditions and uses of the property; development schedule for the project; names of persons involved (contractor, architect, landscaper, business manager, etc.); types of businesses; number of employees; hours of operation; square footage or acreage of the site; number of dwelling units; sale or rental price range for dwelling units; gross square footage of building(s); number of parking stalls, etc.
- Legal Description of Property:** Lot(s) of record or metes and bounds description prepared by a land surveyor.
- Filing Fee:** \$ \_\_\_\_\_ See the fee schedule on the application cover page. Make checks payable to: *City Treasurer.*

**IN ADDITION, THE FOLLOWING ITEMS MAY ALSO BE REQUIRED WITH YOUR APPLICATION; SEE BELOW:**

- For any applications proposing demolition of existing (principal) buildings, photos of the structure(s) to be demolished shall be submitted with your application. Be advised that a *Reuse and Recycling Plan* approved by the City's Recycling Coordinator is required to be approved by the City prior to issuance of wrecking permits.
- A project proposing **ten (10) or more dwelling units** may be required to comply with the City's Inclusionary Zoning requirements outlined in Section 28.04 (25) of the Zoning Ordinance. A separate **INCLUSIONARY DWELLING UNIT PLAN** application detailing the project's conformance with these ordinance requirements shall be submitted concurrently with this application form. Note that some IDUP materials will coincide with the above submittal materials.
- A *Zoning Text* must accompany **all** Planned Community or Planned Unit Development (PCD/PUD) submittals.

**FOR ALL APPLICATIONS:** All applicants are required to submit copies of all items submitted in hard copy with their application (including this application form, the letter of intent, complete plan sets and elevations, etc.) as **INDIVIDUAL** Adobe Acrobat PDF files compiled either on a non-returnable CD to be included with their application materials, or in an e-mail sent to [pcapplications@cityofmadison.com](mailto:pcapplications@cityofmadison.com). The e-mail shall include the name of the project and applicant. Applicants who are unable to provide the materials electronically should contact the Planning Unit at (608) 266-4635 for assistance.

**6. Applicant Declarations:**

- Conformance with adopted City plans:** Applications shall be in accordance with all adopted City of Madison plans:
  - The site is located within the limits of \_\_\_\_\_ Comprehensive Plan, which recommends: \_\_\_\_\_
  - \_\_\_\_\_ Single Family Residential \_\_\_\_\_ for this property.

- Pre-application Notification:** Section 28.12 of the Zoning Ordinance requires that the applicant notify the district alder and any nearby neighborhood or business associations by mail no later than **30** days prior to filing this request:
  - List below the Alderperson, Neighborhood Association(s), Business Association(s) AND dates you sent the notices: \_\_\_\_\_
  - \_\_\_\_\_ Alderperson Skidmore, Sauk Creek Homeowners' Association \_\_\_\_\_
  - If the alder has granted a waiver to this requirement, please attach any such correspondence to this form.

- Pre-application Meeting with staff:** Prior to preparation of this application, the applicant is required to discuss the proposed development and review process with Zoning Counter and Planning Unit staff; note staff persons and date:
  - Planner Bill Roberts Date 1-3-07 | Zoning Staff Matt Tucker Date 1-3-07

**The signer attests that this form has been completed accurately and all required materials have been submitted:**

Printed Name Paul S. Bloom, D.C. Date 2-5-07  
 Signature Paul S. Bloom Relation to Property Owner Self

Authorizing Signature of Property Owner Paul S. Bloom Date \_\_\_\_\_



Letter of Intent – Conditional Use Permit Application  
Paul Bloom, D.C. – 7514 Whitacre Road, Madison, WI 53717

Dear Madison Plan Commission:

I reside at 7514 Whitacre Road in the Sauk Creek neighborhood. I have been a practicing chiropractor in Madison since 1981 (25 years). For most of those years I worked from rented office space on Midvale Boulevard and University Avenue.

For a combination of personal and business reasons, I recently found it necessary to establish a professional home office in my home to continue my practice. This is a permitted use in the R-1 District, and I comply with the requirements for a home occupation. For example, less than 25 percent of the first floor of my home is devoted to my office use. (See attached floor plan). The only exterior indication of my office is a small 4" x 4" nameplate, which I remove at the end of each work-day (see attached photo of name-plate). I see patients in my home 4 days each week (Monday, Tuesday, Thursday, Friday) between 8:30 a.m. and 6:30 p.m. I have been in the home-office since June 1, 2006. I see an average of 1 person per hour. I do not have any radiological equipment in my practice.

The only remodeling done in my home was the creation of a built-in reception desk in the reception room. When I sell my home in the future, it will be an easy matter to remove the reception desk and have the home return to its original state.

I employ one office assistant who answers the phone, schedules appointments, corresponds with insurance companies, processes insurance claims, and manages collections and deposits. She arrives at 7:45 a.m. and leaves at 6:00 p.m. during the 4 work days. She parks her car in my garage. In order to continue employing this assistant, I am applying for a conditional use permit as authorized by Section 28.04(26)(b)3 of the Zoning Code. I was unaware the conditional use permit for an employee was required before I began the home-based business.

The street I live on contains single-family homes, condominiums, rental apartments and rental duplexes. I take great care to be sure that my practice has no adverse effect on my neighborhood, and I care about my neighbors' well being. Allowing me to employ my assistant has no adverse effect on my neighborhood, and in fact has positive effects. She makes no noise, has no impact on parking, and bothers no one. Many people in my neighborhood are away from their homes during the day at their own places of work. My assistant and I provide a presence in the neighborhood, able to keep a watch on things.

Over the last 5 years, my practice income has steadily declined due to economic changes in health-care. Also, since 2003, I have been under obligation by the court to pay my ex-

wife lifetime maintenance. These 2 factors have had a large effect on my ability to meet financial obligations. This is why I have moved the practice to my home.

I respectfully request that you grant my application for a conditional use permit, allowing me to employ one assistant to work in my professional home office.

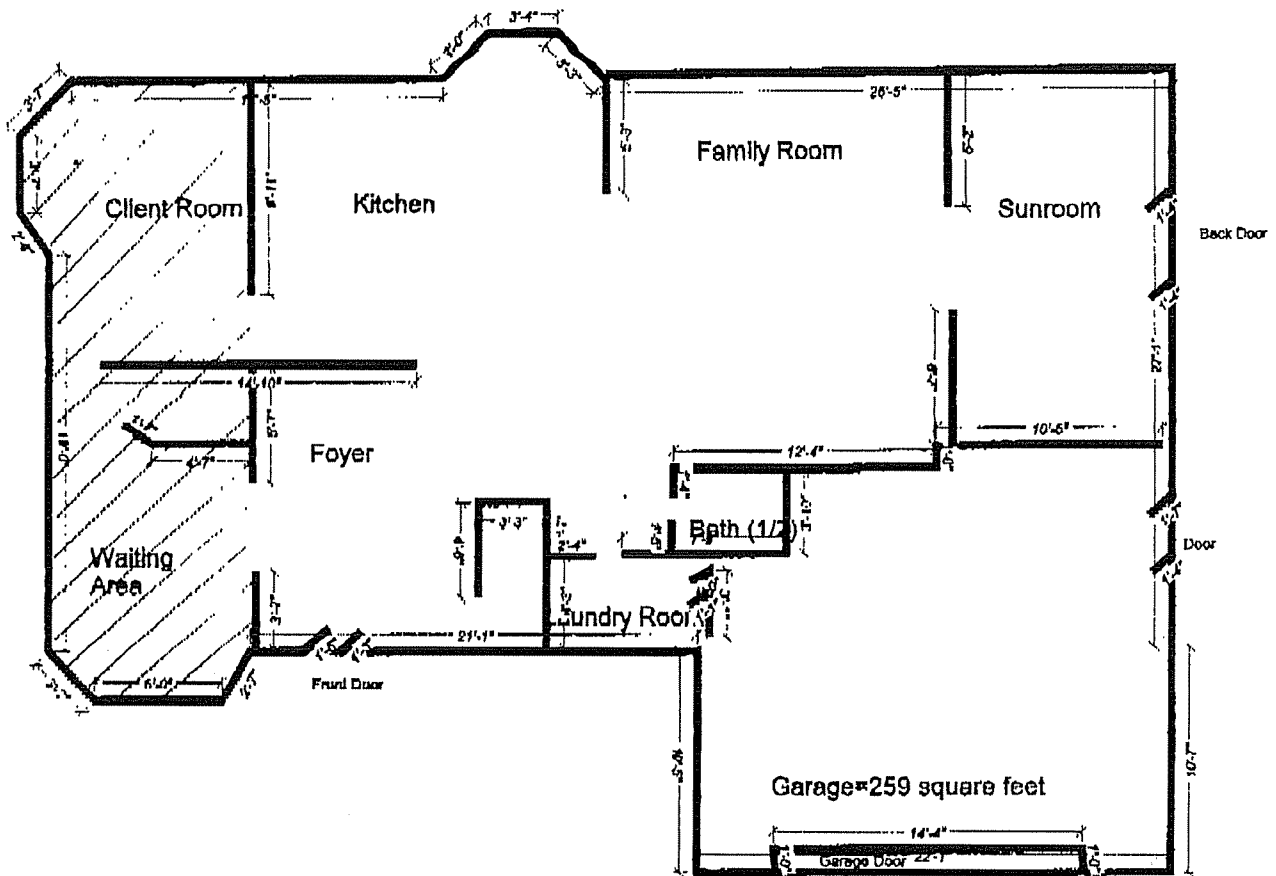
Thank you.



Paul Bloom, D.C.  
7514 Whitacre Road  
Madison, WI 53717

February 5, 2007  
Date

First Floor~1397/1399 square feet w/o garage  
 [Scale: 1/8"=1']



First floor of 7514 Whitacre Road (not including garage) is 1399 sq. ft.  
 Waiting room and client room are 9.5ft X 29ft = 275.5 sq. ft.  
 Business area of home is 19.7 % of first floor.

First floor, including garage, is 1658 sq. ft.  
 Business area of home is 16.6 % of first floor.





3 7/8"

**Dr. Paul Bloom**

**Don't ring bell  
Please come in.**

4 1/8"