

# LAND USE APPLICATION - INSTRUCTIONS & FORM

# LND-A

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:

Paid \_\_\_\_\_ Receipt # \_\_\_\_\_

Date received \_\_\_\_\_

Received by \_\_\_\_\_

Original Submittal  Revised Submittal

Parcel # \_\_\_\_\_

Aldermanic District \_\_\_\_\_

Zoning District \_\_\_\_\_

Special Requirements \_\_\_\_\_

Review required by \_\_\_\_\_

UDC  PC

Common Council  Other \_\_\_\_\_

Reviewed By \_\_\_\_\_

**All Land Use Applications must be filed with the Zoning Office at the above address.**

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 found on the City's web site. (<http://www.cityofmadison.com/development-services-center/documents/SubdivisionApplication.pdf>)

## APPLICATION FORM

### 1. Project Information

Address: 711 STATE STREET

Title: COFFEE CART ALTERATION

### 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) Zoning
- 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 Use
- Demolition Permit
- Other requests \_\_\_\_\_

### 3. Applicant, Agent and Property Owner Information

Applicant name UNIVERSITY BOOK STORE Company UNIVERSITY BOOK STORE  
 Street address 711 STATE STREET City/State/Zip MADISON, WI 53703  
 Telephone 608 310 5950 Email PMEGOWAN@UNIBOOKSTORE.COM

Project contact person BILL MONTELBANO Company BILL MONTELBANO, ARCHITECT  
 Street address 5590 RECEIVE RD. City/State/Zip MADISON, WI 53560  
 Telephone 608-795-4540 Email BILL.MONTELBANO@GMAIL.COM

Property owner (if not applicant) SWD-LUTHERAN CHURCH-MISSOURI SYNOD  
 Street address 8100 W. CAPITAL DR City/State/Zip MILWAUKEE, WI 53222  
 Telephone 414-464-8100 Email RESA@SWD.LCMS.ORG

**APPLICATION FORM (CONTINUED)**

**5. Project Description**

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

COFFEE SHOP EXPANSION WITH SERVING WINDOW, COUNTER AND OUTSIDE SEATING FOR 4 CUSTOMERS

Proposed Dwelling Units by Type (if proposing more than 8 units): N/A

Efficiency: \_\_\_\_\_ 1-Bedroom: \_\_\_\_\_ 2-Bedroom: \_\_\_\_\_ 3-Bedroom: \_\_\_\_\_ 4+ Bedroom: \_\_\_\_\_

Density (dwelling units per acre): \_\_\_\_\_ Lot Size (in square feet & acres): \_\_\_\_\_

Proposed On-Site Automobile Parking Stalls by Type (if applicable): N/A

Surface Stalls: \_\_\_\_\_ Under-Building/Structured: \_\_\_\_\_

Proposed On-Site Bicycle Parking Stalls by Type (if applicable): N/A

Indoor: \_\_\_\_\_ Outdoor: \_\_\_\_\_

Scheduled Start Date: \_\_\_\_\_ Planned Completion Date: \_\_\_\_\_

**6. Applicant Declarations**

- Pre-application meeting with staff.** Prior to preparation of this application, the applicant is strongly encouraged to discuss the proposed development and review process with Zoning and Planning Division staff. Note staff persons and date.

Planning staff Chris Wells JAWINE GUNTER Date 5/23/2019

Zoning staff Jenny Kirchgatter Date 5/23/19

- Demolition Listserv** (<https://www.cityofmadison.com/developmentCenter/demolitionNotification/notificationForm.cfm>).

- Public subsidy is being requested (indicate in letter of intent)

- Pre-application notification:** The zoning code requires that the applicant notify the district alder and all applicable neighborhood and business associations **in writing no later than 30 days prior to FILING this request**. Evidence of the pre-application notification or any correspondence granting a waiver is required. List the alderperson, neighborhood association(s), business association(s), AND the dates notices were sent.

District Alder AURA REDDY Date 5/24/19

Neighborhood Association(s) STATE-LANSDOWN NEIGHBORHOOD ASS. Date 5/30/19

Business Association(s) CONGATEL STATE ST. BUSINESS ASSOC - Date 5/30/19

The applicant attests that this form is accurately completed and all required materials are submitted:

Name of applicant UNIVERSITY BOOK STORE Relationship to property TENANT

Authorizing signature of property owner [Signature] Date 6/10/19