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 US	
Date Received _	2/22/25 1:20 p.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 Subdivision Application. If your project requires both Land Use and 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)

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	Urban Design Commission	on (UDC) submittals, a completed <u>UDC App</u> nittal materials are also required to be sub	cation los sis xav tau cov nt	aub ntawv ua lwm hom ntawv los sis lwm cov bxog cov lus qhia no, thov hu rau Koog Npaj 508) 266-4635.	
A	PPLICATION FORM				
1.	Project Information				
	Address (list all address	ses on the project site):	Madison W	1	
	Title:				
2.		n for (check all that apply)			
	□ Zoning Map Amendment (Rezoning) fromtoto				
	 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 Use Demolition Permit Other requests					
	■ Demolition Permi	t Uther requests			
3.	Applicant, Agent, an	d Property Owner Information			
	Applicant name	ames Montgomery o	ompany The Marq	vette Hotel 3 (afe	
	Street address	arres Montgowerd	ty/State/Zip 4145 P	puldwin St., Madison, Wi 5370	
	Telephone (608)335-8017 E	nail Madison may	quette hotel@gmail.com	
Project contact person Tames Montgome by		Tames Montgome ru	ompany The Marau	ette Hotel 3 Cate	
		14 S Balduin St.			
				ve Hehrtel @ gmail. con	
Property owner (if not applicant)					
	Street address	0	ty/State/Zip		
•	Telephone	E	nail		

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APPLICATION FORM (CONTINUED

AFFLI	CATION FORM (CONTINUED)		
5. Pro	ect Description		
Prov	de a brief description of the project and all proposed uses of the site:		
Ho	tel and cate/restaraunt serving food and		
	n-alcoholic and alcholic boverages.		
	osed Square-Footages by Type:		
(Overall (gross):		
Prop	osed Dwelling Units by Type (if proposing more than 8 units):		
ı	fficiency: 1-Bedroom: 2-Bedroom: 3-Bedroom: 4 Bedroom: 5-Bedroom:		
I	Pensity (dwelling units per acre): Lot Area (in square feet & acres):		
Prop	osed On-Site Automobile Parking Stalls by Type (if applicable):		
5	urface Stalls: Under-Building/Structured: Electric Vehicle-ready¹: Electric Vehicle-installed¹:		
Prop	osed On-Site Bicycle Parking Stalls by Type (if applicable): ¹ See Section 28.141(8)(e), MGO for more information		
- 1	ndoor (long-term): Outdoor (short-term):		
Sche	duled Start Date: Planned Completion Date:		
	elicant 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 Date		
	Zoning staff Date		
	Posted notice of the proposed demolition on the City's Demolition Listsery (if applicable). Date Posted		
	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 Marsha Rummel email Neighborhood Association(s) & Ric Hamilton email Business Association(s) Carla mason email Date 2-21-25 Date 2-21-25		
	Neighborhood Association(s) ERIC Hamilton email Date Z-21-25		
	Business Association(s) Carla mason email Date 2-21-25		
The ap	plicant attests that this form is accurately completed and all required materials are submitted:		
Name o	fapplicant Number Montonery Relationship to property Owner		
uthori	ring signature of property owner TAME) Moreover Date 2-22-25		