

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. 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](#).

4/6/2022
9:46 a.m.

RECEIVED

APPLICATION FORM

1. Project Information

Address (list all addresses on the project site): 5158 Spring Court Madison, Wisconsin
53705

Title: Home and detached garage

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 Use
- ☒ Demolition Permit ☒ Other requests Building permit, electrical permit

3. Applicant, Agent, and Property Owner Information

Applicant name Alex Stoik Company _____

Street address 5158 Spring Ct City/State/Zip Madison Wisconsin 53705

Telephone 248-904-9631 Email _____

Project contact person Octavio Galvez Company _____

Street address 5075 Rocky LN City/State/Zip Loves Park, IL 61111

Telephone 815-319-0401 Email _____

Property owner (if not applicant) _____

Street address _____ City/State/Zip _____

Telephone _____ Email _____

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APPLICATION FORM (CONTINUED)**5. Project Description**

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

Project consists of tearing down existing garage, cutting concrete, creating new concrete footings, applying flat concrete, building new garage, Basic elec.

Proposed Square-Footages by Type:

Overall (gross): 580 sf Commercial (net): _____ Office (net): _____
Industrial (net): _____ Institutional (net): _____

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

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):

Surface Stalls: _____ Under-Building/Structured: _____

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

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 _____ Date _____

Zoning staff Jacob Moskowitz Date _____

- ☐ **Posted notice of the proposed demolition on the [City's Demolition Listserv](#)** (if applicable).

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

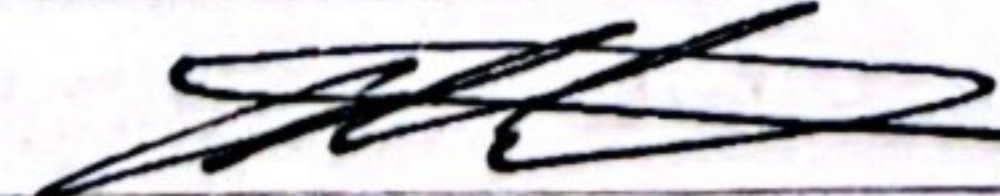
- ☒ **Pre-application notification:** The zoning code requires that the applicant notify the district alder and all applicable neighborhood and business associations in writing no later than 30 days prior to FILING this request. Evidence of the pre-application notification or any correspondence granting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

District Alder Waiver from Alder Furman Date 2/23/2022

Neighborhood Association(s) _____ Date _____

Business Association(s) _____ Date _____

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

Name of applicant Alex Stoick Relationship to property OwnerAuthorizing signature of property owner  Date 2/3/22

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