

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 1/29/24 11:30 a.m.

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](#).

APPLICATION FORM

1. Project Information

Address (list all addresses on the project site): 430, 432, & 444 State Street, Madison, WI 53703

Title: 430-444 State Street

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 _____

3. Applicant, Agent, and Property Owner Information

Applicant name Joe McCormick **Company** JD McCormick Properties
Street address 101 N. Mills Street **City/State/Zip** Madison, WI 53715
Telephone (608) 819-6500 **Email** Joe@jdmccormick.com

Project contact person Kevin Burow **Company** Knothe & Bruce Architects LLC.
Street address 8401 Greenway Blvd., Ste 900 **City/State/Zip** Middleton, WI 53562
Telephone (608) 836-3690 **Email** kburow@knothebruce.com

Property owner (if not applicant) _____
Street address _____ **City/State/Zip** _____
Telephone _____ **Email** _____

APPLICATION FORM (CONTINUED)

5. Project Description

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

A 5-story, mixed-use development with 26 units and 6,455 SF of commercial space.

Proposed Square-Footages by Type:

Overall (gross): 28,161 S.F. Commercial (net): 6,455 S.F. Office (net):
Industrial (net): Institutional (net):

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

Efficiency: 22 1-Bedroom: 3 2-Bedroom: 1 3-Bedroom: 4+ Bedroom:

Density (dwelling units per acre): Lot Size (in square feet & acres): 6,928 S.F. / .16 ACRES

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

Surface Stalls: 0 Under-Building/Structured: 0

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

Indoor: 26 Outdoor: 8

Scheduled Start Date: Summer 2023 Planned Completion Date: Summer 2024

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 Sydney Prusak Date 7/22/2019

Zoning staff Matt Tucker Date 7/22/2019

- ☐ **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 Julia Bennett Date 1/8/24

Neighborhood Association(s) Capitol Neighborhood Association Date 1/8/24

Business Association(s) Greater State Street Business Association Date 1/8/24

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

Name of applicant Joe McCormick Relationship to property Owner

Authorizing signature of property owner  Date