

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



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](#).

FOR OFFICE USE ONLY:

Paid _____ Receipt # _____

Date received _____ 4/29/24 10:58 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 _____

APPLICATION FORM

1. Project Information

Address (list all addresses on the project site): _____

Title: _____

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 _____ **Company** _____

Street address _____ **City/State/Zip** _____

Telephone _____ **Email** _____

Project contact person _____ **Company** _____

Street address _____ **City/State/Zip** _____

Telephone _____ **Email** _____

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:

Outdoor seating along the street frontage of a new bar tenant at 711 E Johnson St. Temporary, seasonal fencing will be placed to provide entry control for the seating.

Seating will be limited to 32 persons. Restroom facilities in the bar have been sized for indoor + outdoor seating totals.

Proposed Square-Footages by Type: N/A - Proposed outdoor seating = approx 356 sf

Overall (gross): _____ 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 Chris Wells Date 2/16/24

Zoning staff Jacob Moskowitz Date 2/16/24

- ☐ **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.

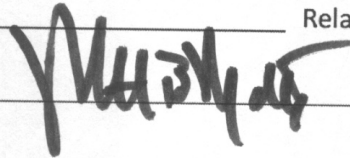
District Alder Marsha Rummel Date 02/26/24

Neighborhood Association(s) TLNA Date 02/26/24

Business Association(s) _____ Date _____

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

Name of applicant Matthew Tills Relationship to property Architect

Authorizing signature of property owner  Date 4.07.24