APPLICATION FOR URBAN DESIGN COMMISSION REVIEW AND APPROVAL

AGENDA ITEM # _____ Project # _____

	DATE SUBMITTED:	01/12/2011	X Action Requested Informational Presentation Initial Approval and/or Recommendation	
	UDC MEETING DATE:	01/19/2011	Final Approval and/or Recommendation	
	PROJECT ADDRESS:Madison Area Technical Colleg		College – 3550 Anderson Street, Madison,WI	
	OWNER/DEVELOPER (Partners and/or Principal Madison Area Technical College Mike Stark		ARCHITECT/DESIGNER/OR AGENT: Zimmerman Architectural Studios, Inc. Doug Barnes	
	CONTACT PERSON: Doug Barnes Address: 2122 West Mt. Vernon Avenue Milwaukee, WI 53233		enue	
	Phone: Fax: E-mail address:	(414) 687-9796 (cell) (414) 302-3738		
	TYPE OF PROJECT: (See Section A for:)			
(See Section B for:) New Construction or Exterior Remodeling in C4 District (Fee required)			District (Fee required)	
	(See Section C for:) R.P.S.M. Parking Variance (Fee required)			
	(See Section D for:) Comprehensive Design Review* (Fee required) Street Graphics Variance* (Fee required)			
	Other			
	*Public Hearing Required (Submission Deadline 3 Weeks in Advance of Meeting Date)			

Where fees are required (as noted above) they apply with the first submittal for either initial or final approval of a project.

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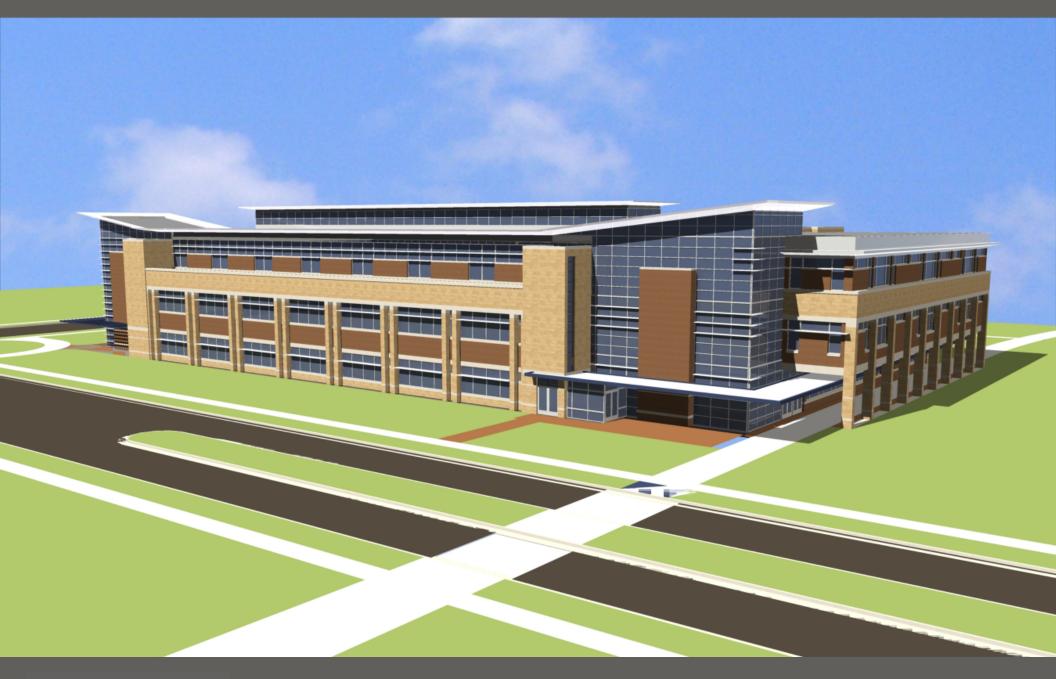
Allied Health Building Concept Model Floors 1-3





5106 North Port Washington Road | Milwaukee, WI 53217 | zastudios.com

Aerial view from the East-Northeast









View from Northeast (Truax)

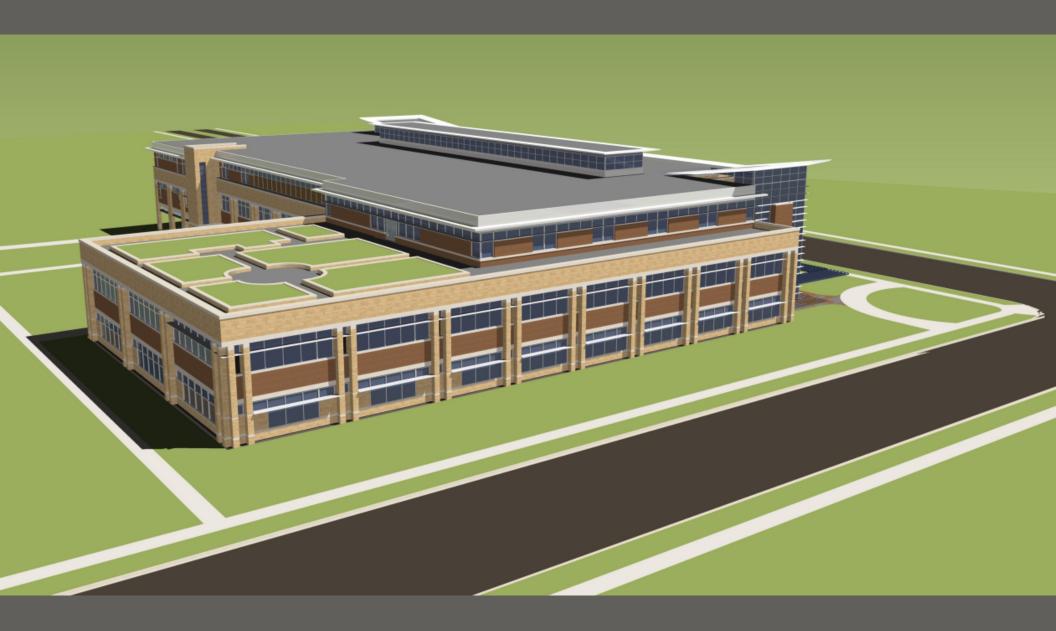








Aerial view from the South-Southwest





Aerial view from the East-Northeast



