# 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 at the above address.**

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 found on the City's web site. (http://www.cityofmadison.com/development-services-center/documents/SubdivisionApplication.pdf)

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 _____

## APPLICATION FORM

### 1. Project Information

Address: Lot 1, Plat of Chapel View, Madison WI 9910 Peach Leaf Lane

Title: The Cottages At Chapel View

### 2. This is an application for (check all that apply)

☑ Zoning Map Amendment (Rezoning) from TR-C3 to TR-V2

☐ Major Amendment to an Approved Planned Development-General Development Plan (PD-GDP) Zoning

☐ 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** Chad Wuebben, President Company Chapel View Development Company Inc.

Street address 6840 Schneider Road City/State/Zip Middleton WI 53562

Telephone 608-836-9601 Email cwuebben@encorehomesinc.com

**Project contact person** SAME AS APPLICANT Company _____

Street address _____ City/State/Zip _____

Telephone _____ Email _____

**Property owner (if not applicant)** SAME AS 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:

Residential Building Complex comprised of 28 single family detached units on two lots within the Plat of Chapel View.

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

Efficiency: _____ 1-Bedroom: _____ 2-Bedroom: 7 3-Bedroom: 8 4+ Bedroom: _____

Density (dwelling units per acre): 7.77 DU/ACRE Lot Size (in square feet & acres): 84,052 SF = 1.93 AC

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

Surface Stalls: 0 Under-Building/Structured: 30

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

Indoor: 30 Outdoor: 14

Scheduled Start Date: June, 2019 Planned Completion Date: September, 2020

### 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 Tim Parks, Janine Glaeser Date January 23, 2019

Zoning staff Jacob Moskowitz Date January 23, 2019

☐ **Demolition Listserv** (https://www.cityofmadison.com/developmentCenter/demolitionNotification/notificationForm.cfm).

☐ 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 Paul Skidmore, District 9 Date December 12, 2018

Neighborhood Association(s) Elderberry Neighborhood Association Date December 12, 2018

Business Association(s) _____ Date _____

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

Name of applicant Chad Wuebben, President Relationship to property President of Owner

Authorizing signature of property owner Chad Wuebben Date April 3, 2019