

# 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 \$600 Receipt # 093291-0001

Date received TWS

Received by 7/17/19

Original Submittal  Revised Submittal

Parcel # 0810-323-0601-2

Aldermanic District 15-Foster

Zoning District TE

Special Requirements \_\_\_\_\_

Review required by \_\_\_\_\_

UDC  PC

Common Council  Other \_\_\_\_\_

Reviewed By \_\_\_\_\_

**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>)

## APPLICATION FORM

### 1. Project Information

Address: 3116 COMMERCIAL AVE.

Title: CRUCIBLE NIGHTCLUB - OUTDOOR PATIO ADDITION

### 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) 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 JASON SOCHA Company ALABASTER HOLDINGS LLC  
~~ALABASTER ENTERTAINMENT LLC~~

Street address 3116 COMMERCIAL AVE. City/State/Zip MADISON, WI 53714

Telephone 608-213-9838 Email SOCHA.JASON@GMAIL.COM

Project contact person SAME Company \_\_\_\_\_

Street address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Property owner (if not applicant) SAME

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 NEW FENCE WILL BE BUILT AROUND AN EXISTING PAVED AREA TO PROVIDE AN OUTDOOR PATIO / "BEER GARDEN".

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

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): EXISTING/NO CHANGE

Surface Stalls: 50 Under-Building/Structured: \_\_\_\_\_

Proposed On-Site Bicycle Parking Stalls by Type (if applicable): EXISTING/NO CHANGE

Indoor: \_\_\_\_\_ Outdoor: 18

Scheduled Start Date: 8/31 Planned Completion Date: 9/1

6. Applicant Declarations

[X] 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 6/24/2019

Zoning staff Jenny Kirchgatter Date 6/24/19

[ ] Demolition Listserv (https://www.cityofmadison.com/developmentCenter/demolitionNotification/notificationForm.cfm).

[ ] Public subsidy is being requested (indicate in letter of intent)

[X] 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 GRANT FOSTER (WAIVER GRANTED, ATTACHED) Date 5/24, 7/8, 7/16

Neighborhood Association(s) CARPENTER-RIDGUEWAY Date 5/24, 7/8, 7/16

Business Association(s) NORTHSIDE BA Date 7/16

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

Name of applicant JASON SOCHA Relationship to property OWNER

Authorizing signature of property owner [Signature] Date 2019-07-16