LAND USE APPLICATION - INSTRUCTIONS & FORM



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

FOR OFFICE USE ONLY:		
Paid 4 600	Receipt # <u>9 4111 - OC</u>	<i>ا</i> (
Date received	13/19	
Received by	K.	
Original Submittal	☐ Revised Submittal	
Parcel # 07/0 - :	302-0419 - 4	
Aldermanic District /L	1-Shevi Carte	V
Zoning District	R-C/	
Special Requirements	NACES TO EXTEND MADE A CONTROL OF STATE	
Review required by		
□ UDC	□ PC	
☐ Common Council	☐ Other	
Reviewed By		

(http://www.cityofma	on found on the City's web site. dison.com/development-services- pdivisionApplication.pdf)	UDC Common Council	□ PC □ Other
APPLICATION FORM			
1. Project Information	n		
Address: 271	1 WRUNONA WAN	Madiso	n W.
Title: Sin	of family home de	molition	•
2. This is an applicat	ion for (check all that apply)		
Zoning Map An	nendment (Rezoning) from	to	***************************************
Major Amendm	nent to an Approved Planned Develo	pment-General Developn	nent Plan (PD-GDP) Zoning
Major Amendm	nent to an Approved Planned Develo	pment-Specific Implemer	itation Plan (PD-SIP)
☐ Review of Alter	ation to Planned Development (PD)	(by Plan Commission)	
<i>)</i>	e or Major Alteration to an Approved	Conditional Use	
Demolition Per	mit		
Other requests			
3. Applicant, Agent a	and Property Owner Information		
Applicant name	Jeffrey Stever	Company Awn	na vina sa di di di na na manamina na na di sa di di sa di di sa di sa sa sa di di da sa di di di di di di di d La Caracteria di
Street address	SSIZ Etholwan R1	City/State/Zip W	ladism w, 53713
Telephone	5512 Etholwan R1 608-223-0262	Email	ner ewise. edu
Project contact pers	son Same	Company	
Street address		City/State/Zip	
Telephone		Email	
Property owner (if		Teuer	
Street address	5512 Ethelwan Rd 608-223-0262	City/State/ZipM	Idison, W: 53713
Telephone	608-223-0262	Email	ELLEKE WISC. EDY
M:\PLANNING DIVISION\COMMISSIONS	s & Committees\Plan Commission\Administration\Appl	ICATION - MARCH 2019	PAGE 3 OF 6

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LND-A

APPLICATION FORM (CONTINUED)

5. Project Description
Provide a brief description of the project and all proposed uses of the site:
Demolish existing single family home to
construct new sixgle family home
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:
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 Tim Parks Date
Zoning staff_ Jenny Kirchgatter Date
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 Ms Sheri Carter Date 7/13/19
Neighborhood Association(s) MR. Josh Lauk Date 7/13/19
Business Association(s) Ms Jodi Fisher Date 7/13/19
CC: Junnifer Allow; Tim Parks
The applicant attests that this form is accurately completed and all required materials are submitted:
Name of applicant Steuer Relationship to property Adowner
Authorizing signature of property owner Date 7/19/19