

# 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 # 95054

Date received 9/6/19

Received by PDA

Original Submittal  Revised Submittal

Parcel # 0709-182-0301-2

Aldermanic District 19-FURMAN

Zoning District TR-C1

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: 5646 Lake Mendota Drive, Madison, WI 53705  
 Title: Shed

### 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** Tanya Cunningham Company —  
**Street address** 5646 Lake Mendota Dr City/State/Zip Madison, WI 53705  
**Telephone** 608-492-3270 Email itmakesyousmile@gmail.com

**Project contact person** Tanya Cunningham Company —  
**Street address** 5646 Lake Mendota Drive City/State/Zip Madison, WI 53705  
**Telephone** 608-492-3270 Email itmakesyousmile@gmail.com

**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:

Placement of an 8'x12' gardening shed, within the building envelope of my property.

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: Oct 14, 2019 Planned Completion Date: Oct 31, 2019

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 Colin Punt Date 7/2/19

Zoning staff Jacob Moskowitz Date 7/2/19

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 Keith Furman Date Aug 11, 2019

Neighborhood Association(s) Spring Harbor Neighborhood Association Date Aug 11, 2019

Business Association(s) \_\_\_\_\_ Date \_\_\_\_\_

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

Name of applicant Tanya Cunningham Relationship to property owner

Authorizing signature of property owner Tanya Cunningham Date Aug 11, 2019