

	\$1750.00 > study 5	
LAND USE APPLICATION	FOR OFFICE USE ONLY: 84033	
Madison Plan Commission	Amt. Paid # 550. Receipt No. <u> </u>	
215 Martin Luther King Jr. Blvd; Room LL-100	Date Received 4/1/07	
PO Box 2985; Madison, Wisconsin 53701-2985	Received By	
Phone: 608.266.4635   Facsimile: 608.267.8739	Parcel No. <u>0709-324-64/6-7</u>	
<ul> <li>The following information is required for all applications for Plan Commission review except subdivisions or land divisions, which should be filed with the <u>Subdivision Application</u>.</li> <li>Before filing your application, please review the information regarding the <b>LOBBYING ORDINANCE</b> on the first page.</li> <li>Please read all pages of the application completely and fill in all required fields.</li> </ul>	Aldermanic District /O - Brian Solomon  GQ Existing CU  Zoning District / Q R U  For Complete Submittal  Application / Letter of Intent  IDUP / A Legal Descript.	
<ul> <li>required fields.</li> <li>This application form may also be completed online at <a href="https://www.cityofmadison.com/planning/plan.html">www.cityofmadison.com/planning/plan.html</a></li> </ul>	Plan Sets Zoning Text MA  Alder Notification Waiver 7/29/07	
<ul> <li>All zoning applications should be filed directly with the Zoning Administrator.</li> </ul>	Ngbrhd. Assn Not. Waiver  Date Sign Issued	
1. Project Address: 1326 5 Miduace Blud	Project Area in Acres:	
Project Title (if any): Doen Hardware Towen Resplacement		
2. This is an application for: (check at least one)		
Zoning Map Amendment (check only ONE box below for re	zoning and fill in the blanks accordingly)	
☐ Rezoning from to ☐	Rezoning from to PUD/ PCD-SIP	
☐ Rezoning from to PUD/ PCD-GDP ☐	Rezoning from PUD/PCD-GDP to PUD/PCD-SIP	
Conditional Use	her Requests (Specify):	
3. Applicant, Agent & Property Owner Information:		
Applicant's Name: Scott Stand Com	npany: //=RIZON WIRELESS	
Street Address: 3580 Klassrove Cincle City/State:		
Telephone: (92v) 265-6263 Fax: ( )	•	
Project Contact Person: Scott 5 team Com	npany: SAC WILLEUSS	
Street Address: 3580 Flas STONE Circle City/State:		
Telephone: (92a) 261-6263 Fax: ( )		
Property Owner (if not applicant): MIDUALE CORNER L	Lc.	
Street Address: 1348. 5 MidUALE BUM City/State:	MAdeson we zip: 53717	
4. Project Information:		
Provide a general description of the project and all proposed uses of the site: REPLACE 65' Causen		
TOWER WITH 88.6FT Camer town		
Development Schedule: Commencement ASAP	Completion /2/3//07	

CONTINUE →

5.	Required Submittals:
	<b>Site Plans</b> submitted as follows below and depicts all lot lines; existing, altered, demolished or proposed buildings; parking areas and driveways; sidewalks; location of any new signs; existing and proposed utility locations; building elevations and floor plans; landscaping, and a development schedule describing pertinent project details:
	• Seven (7) copies of a full-sized plan set drawn to a scale of one inch equals 20 feet (collated and folded)
	Seven (7) copies of the plan set reduced to fit onto 11 inch by 17 inch paper (collated, stapled and folded)
	One (1) copy of the plan set reduced to fit onto 8 ½ inch by 11 inch paper
	<b>Letter of Intent:</b> <i>Twelve (12) copies</i> describing this application in detail but not limited to, including: existing conditions and uses of the property; development schedule for the project; names of persons involved (contractor, architect, landscaper, business manager, etc.); types of businesses; number of employees; hours of operation; square footage or acreage of the site; number of dwelling units; sale or rental price range for dwelling units; gross square footage of building(s); number of parking stalls, etc.
	Legal Description of Property: Lot(s) of record or metes and bounds description prepared by a land surveyor. For any application for rezoning, the description must be submitted as an electronic word document via CD or e-mail.
	<b>Filing Fee:</b> \$ See the fee schedule on the application cover page. Make checks payable to: <i>City Treasurer</i> .
IN	ADDITION, THE FOLLOWING ITEMS MAY ALSO BE REQUIRED WITH YOUR APPLICATION; SEE BELOW:
	For any applications proposing demolition of existing buildings, <b>photos</b> of the interior and exterior of the structure(s) to be demolished shall be submitted with your application. Be advised that a <b>Reuse and Recycling Plan</b> approved by the City's Recycling Coordinator is required prior to issuance of wrecking permits.
	A project proposing <b>ten (10) or more dwelling units</b> may be required to comply with the City's Inclusionary Zoning requirements outlined in Section 28.04 (25) of the Zoning Ordinance. A separate INCLUSIONARY DWELLING UNIT PLAN application detailing the project's conformance with these ordinance requirements shall be submitted concurrently with this application form. Note that some IDUP materials will coincide with the above submittal materials.
	A <b>Zoning Text</b> must accompany <u>all</u> Planned Community or Planned Unit Development (PCD/PUD) submittals.
apı Adı ma	OR ALL APPLICATIONS: All applicants are required to submit copies of all items submitted in hard copy with their plication (including this application form, the letter of intent, complete plan sets and elevations, etc.) as INDIVIDUAL obe Acrobat PDF files compiled either on a non-returnable CD to be included with their application materials, or in an earli sent to <a href="mailto:pcapplications@cityofmadison.com">pcapplications@cityofmadison.com</a> . The e-mail shall include the name of the project and applicant. Applicants to are unable to provide the materials electronically should contact the Planning Unit at (608) 266-4635 for assistance.
6.	Applicant Declarations:
	Conformance with adopted City plans: Applications shall be in accordance with all adopted City of Madison plans:
	→ The site is located within the limits of the:  ———————————————————————————————————
	for this property.
	<b>Pre-application Notification:</b> Section 28.12 of the Zoning Ordinance requires that the applicant notify the district alder and any nearby neighborhood or business associations by mail no later than <b>30</b> days prior to filing this request:
	→ List below the Alderperson, Neighborhood Association(s), Business Association(s) AND dates you sent the notices:
	Alderna BRIAN Solomon VIA E-and 7/10/07
	NOTE: If the alder has granted a waiver to this requirement, please attach any such correspondence to this form.
	<b>Pre-application Meeting with staff:</b> Prior to preparation of this application, the applicant is required to discuss the proposed development and review process with Zoning Counter and Planning Unit staff; note staff persons and date.
	Planner MATT TUCKEN Date 7/10/07   Zoning Staff Date
T	he signer attests that this form is accurately completed and all required materials are submitted:
Pı	rinted Name 5 cott 5tave Date 8/1/07
.S	ignature
Α	uthorizing Signature of Property Owner Date

Effective June 26, 2006