



LAND USE APPLICATION

CITY OF MADISON

215 Martin Luther King Jr. Blvd; Room LL-100
PO Box 2985; Madison, Wisconsin 53701-2985
Phone: 608.266.4635 | Facsimile: 608.267.8739

- All Land Use Applications should be filed with the Zoning Administrator at the above address.
- The following information is required for all applications for Plan Commission review except subdivisions or land divisions, which should be filed using the Subdivision Application.
- This form may also be completed online at:
www.cityofmadison.com/developmentcenter/landdevelopment

FOR OFFICE USE ONLY:	
Amt. Paid	\$650 -
Receipt No.	141435
Date Received	4/2/13
Received By	JEM
Parcel No.	0710-072-2209-6
Aldermanic District	6
Zoning District	TR-C4
Special Requirements	WATERFRONT, FLOODPLAIN
Review Required By:	
<input type="checkbox"/> Urban Design Commission	<input checked="" type="checkbox"/> Plan Commission
<input type="checkbox"/> Common Council	<input type="checkbox"/> Other:

Form Effective: February 21, 2013

1. Project Address: 1437 MORRISON STREET
Project Title (if any): THE BERTRAM RESIDENCE

2. This is an application for (Check all that apply to your Land Use Application):

- ☐ Zoning Map Amendment from _____ to _____
- ☐ Major Amendment to Approved PD-GDP Zoning ☐ Major Amendment to Approved PD-SIP Zoning
- ☐ Review of Alteration to Planned Development (By Plan Commission)
- ☒ Conditional Use, or Major Alteration to an Approved Conditional Use
- ☒ Demolition Permit
- ☐ Other Requests: _____

3. Applicant, Agent & Property Owner Information:

Applicant Name: MARK M. WOHLFORD Company: DESIGN SHELTERS, LLC.
Street Address: 3207 GLACIER RIDGE RD. City/State: MIDDLETON, WI. Zip: 53562
Telephone: (608) 662-9090 Fax: 608 662-9095 Email: mark@designshelters.com
Project Contact Person: (SAME AS APPLICANT) Company: _____
Street Address: _____ City/State: _____ Zip: _____
Telephone: () _____ Fax: () _____ Email: mark@designshelters.com
Property Owner (if not applicant): JOHN & MARIANN BERTRAM
Street Address: 1437 MORRISON ST. City/State: MADISON, WI. Zip: 53705

4. Project Information:

Provide a brief description of the project and all proposed uses of the site: DEMO EXISTING STRUCTURE THEN BUILD A TWO STORY SINGLE FAMILY HOME
Development Schedule: Commencement 5/13/13 Completion 11/13/13 ±

5. Required Submittal Information

All Land Use applications are required to include the following:

☒ **Project Plans** including:*

- Site Plans (fully dimensioned plans depicting project details including all lot lines and property setbacks to buildings; demolished/proposed/alterd buildings; parking stalls, driveways, sidewalks, location of existing/proposed signage; HVAC/Utility location and screening details; useable open space; and other physical improvements on a property)
- Grading and Utility Plans (existing and proposed)
- Landscape Plan (including planting schedule depicting species name and planting size)
- Building Elevation Drawings (fully dimensioned drawings for all building sides, labeling primary exterior materials)
- Floor Plans (fully dimensioned plans including interior wall and room location)

Provide collated project plan sets as follows:

- Seven (7) copies of a full-sized plan set drawn to a scale of 1 inch = 20 feet (folded or rolled and stapled)
- Twenty Five (25) copies of the plan set reduced to fit onto 11 X 17-inch paper (folded and stapled)
- One (1) copy of the plan set reduced to fit onto 8 1/2 X 11-inch paper

* ~~For projects requiring review by the Urban Design Commission, provide Fourteen (14) additional 11x17 copies of the plan set. In addition to the above information, all plan sets should also include: 1) Colored elevation drawings with shadow lines and a list of exterior building materials/colors; 2) Existing/proposed lighting with photometric plan & fixture cutsheet; and 3) Contextual site plan information including photographs and layout of adjacent buildings and structures. The applicant shall bring samples of exterior building materials and color scheme to the Urban Design Commission meeting.~~

☒ **Letter of Intent: Provide one (1) Copy per Plan Set** describing this application in detail including, but not limited to:

- | | | |
|-----------------------------------------------|-------------------------------------------------|--------------------------------------------------------------|
| • Project Team | • Building Square Footage | • Value of Land |
| • Existing Conditions | • Number of Dwelling Units | • Estimated Project Cost |
| • Project Schedule | • Auto and Bike Parking Stalls | • Number of Construction & Full-Time Equivalent Jobs Created |
| • Proposed Uses (and ft ² of each) | • Lot Coverage & Usable Open Space Calculations | • Public Subsidy Requested |
| • Hours of Operation | | |

☒ **Filing Fee:** Refer to the Land Use Application Information & Fee Schedule. Make checks payable to: City Treasurer. \$650.00

☐ **Electronic Submittal:** All applicants are required to submit copies of all items submitted in hard copy with their application as Adobe Acrobat PDF files on a non-returnable CD to be included with their application materials, or by e-mail to pcapplications@cityofmadison.com.

☐ **Additional Information** may be required, depending on application. Refer to the Supplemental Submittal Requirements.

6. Applicant Declarations

☒ **Pre-application Notification:** The Zoning Code requires that the applicant notify the district alder and any nearby neighborhood and business associations in writing no later than 30 days prior to FILING this request. List the alderperson, neighborhood association(s), and business association(s) AND the dates you sent the notices:

1) ALDER MARSHA RUMMEL - 1/23/13 2) MARQUETTE NEIGHBORHOOD ASSN. 1/24/13

→ If a waiver has been granted to this requirement, please attach any correspondence to this effect to this form.

☒ **Pre-application Meeting with Staff:** Prior to preparation of this application, the applicant is required to discuss the proposed development and review process with Zoning and Planning Division staff; note staff persons and date.

Planning Staff: KEVIN FIRCHOW Date: 1.17.13 Zoning Staff: MATT TICKER Date: 1.17.13

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

Name of Applicant MARK M. WOHLFORD Relationship to Property: DESIGNER/BUILDER
Authorizing Signature of Property Owner Mark M. Wohlford Date 4.1.13
AGENT