

# 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 \_\_\_\_\_ Receipt # \_\_\_\_\_

Date received 4/8/19

Received by JLK

Original Submittal  Revised Submittal

Parcel # 0709-324-1030-4

Aldermanic District 10

Zoning District TR-C2

Special Requirements wp-10

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: 4216 Doncaster Dr.

Title: Kitts Residence

### 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 Michael J. Kitts Company \_\_\_\_\_

Street address 730 Williamson St. #518 City/State/Zip Madison, WI 53703

Telephone 608-332-5537 Email mjkitts@yahoo.com

Project contact person Steve Mulcahy Jr. Company Mulcahy Construction

Street address 6788 Depot St. City/State/Zip Windsor, WI 53598

Telephone 608-575-7085 Email stevem069@hotmail.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:

We plan to build a 2-story single family home, which will be owner occupied, with a 2-car detached garage.

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

Efficiency: \_\_\_\_\_ 1-Bedroom: \_\_\_\_\_ 2-Bedroom: [check] 3-Bedroom: \_\_\_\_\_ 4+ Bedroom: \_\_\_\_\_

Density (dwelling units per acre): 1 Lot Size (in square feet & acres): 4,800 sqft, .11 acre

Proposed On-Site Automobile Parking Stalls by Type (if applicable):

Surface Stalls: \_\_\_\_\_ Under-Building/Structured: 2

Proposed On-Site Bicycle Parking Stalls by Type (if applicable):

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

Scheduled Start Date: May 7, 2019 Planned Completion Date: Nov 7, 2019

6. Applicant Declarations

[check] 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 3/27/2019

Zoning staff Jacob Moskowitz Date 3/27/19

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

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

[check] 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 Maurice Cheeks Date 4-3-19

Neighborhood Association(s) Marlborough Date 3-31-19

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

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

Name of applicant Michael J. Kitts Relationship to property owner

Authorizing signature of property owner [Signature] Date 4-3-19