

## **LAND USE APPLICATION**Madison Plan Commission

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

- The following information is required for all applications for Plan Commission review except subdivisions or land divisions, which should be filed with the Subdivision Application.
- Before filing your application, please review the information regarding the LOBBYING ORDINANCE on the first page.
- Please read all pages of the application completely and fill in all required fields.
- This application form may also be completed online at

F		
FOR OF	FICE USE ONLY:	
Amt. Paid	Receipt No.	
Date Received		
Received By		
Darent No.		
Aldermanic District		
GQ		
Zoning District		
For Complete Submittal		
Application	Letter of	
	Intent	
IDUP	Legal Descript.	
Plan Sets	Zoning Text	
	Waiver	
	Waiver	
Date Sign Issued		
Droject Are	a in Acres: 4.47	
Project Are	a III Aciesi	
of the columns below)		
	t of a PUD or PCD District:	
c. Zoning:	to PUD/PCD-GDP	
c. Zoning:	to PUD/PCD-SIP	
mended Gen. Dev.	Amended Spec. Imp. Plan	
ther Requests (Speci	fv):	
<sub>mpany:</sub> Gateway Proje	ct, LLC	
Madison, WI	Zip:	
Email: brad.carlson(		
	- A	
mpany: Vierbicher Asse		
Madison, WI	Zip: 53717	
smpit@vierbi	icher.com	
	Zip:	
the site:		
***************************************		
enter with rectaurant		

www.cityofmadison.com/planning/plan.html	Plan Sets Zoning Text
All Land Use Applications should be filed directly wi	th the Alder Notification Waiver
Zoning Administrator.	Ngbrhd. Assn Not Waiver
	Date Sign Issued
2205 Dimrock Book	
. Project Address: 2205 Rimrock Road	Project Area in Acres: 4.47
Project Title (if any): Crowne Plaza Hotel	
2. This is an application for:	
Coning Map Amendment (check the appropriate box(es) in	
Rezoning to a <u>Non</u> -PUD or PCD Zoning Dist.:	Rezoning to or Amendment of a PUD or PCD District
ixisting Zoning: Temporary Ag to	Ex. Zoning: to PUD/PCD-GDP
roposed Zoning (ex: R1, R2T, C3): C3L	Ex. Zoning: to PUD/PCD-SIP
	Amended Gen. Dev. Amended Spec. Imp. Pla
✓ Conditional Use ✓ Demolition Permit	Other Requests (Specify):
Project Contact Person: Sarah Pittz  Street Address: 999 Fourier Drive Ste. 201 Ci	Company: Vierbicher Associates, Inc.  ty/State: Madison, WI Zip: 53717
elephone: (608) 826-0532 Fax: (608) 826-053	Email: Shiphle verbioner.com
roperty Owner (if not applicant): See Attached	
treet Address: Ci	ty/State: Zip:
4. Project Information: Provide a brief description of the project and all proposed Redevelopment of 230-room Crowne Plaza hotel and con	
Development Schedule: Commencement 04/2011	Completion

	CONTINUE →
5. Required Submittals:	
elevations and floor plans; landscaping, and a developn	new signs; existing and proposed utility locations; building nent schedule describing pertinent project details:
• 7 copies of a full-sized plan set drawn to a scale of o	
• 7 copies of the plan set reduced to fit onto 11 inch b	
• 1 copy of the plan set reduced to fit onto 8 ½ inch by	
architect, landscaper, business manager, etc.); types	lule for the project; names of persons involved (contractor, of businesses; number of employees; hours of operation; ng units; sale or rental price range for dwelling units; gross
applications proposing rezoning to more than one distric	mitted as an electronic word document via CD or e-mail. For t, a separate description of each district shall be submitted.
Filing Fee: $\frac{1,250}{}$ See the fee schedule on the application	cation cover page. Make checks payable to: City Treasurer.
application (including this application form, the letter of Acrobat PDF files on a non-returnable CD to be include	ubmit copies of all items submitted in hard copy with their f intent, complete plan sets and elevations, etc.) as Adobe and with their application materials, or in an e-mail sent to ude the name of the project and applicant. Applicants unable the Planning Division at (608) 266-4635 for assistance.
In Addition, The Following Items May Also Be Require	ed With Your Application:
For any applications proposing demolition or removal of	existing buildings, the following items are required:
<ul> <li>Prior to the filing of an application, the applicant or</li> </ul>	his/her agent is required to notify a list of interested or to filing their application using the online notification
written assessment of the condition of the building(	terior of the building(s) to be demolished or removed. A s) to be demolished or removed is highly recommended. City's Recycling Coordinator is required prior to issuance
Zoning Text (12 copies): must accompany Planned Co	ommunity or Planned Unit Development (PCD/PUD) submittals
6. Applicant Declarations:	
✓ Conformance with adopted City plans: Applications s → The site is located within the limits of None	shall be in accordance with all adopted City of Madison plans:
	Plan, which recommends:
	for this property.
and any nearby neighborhood & business associations in	ning Code requires that the applicant notify the district alder n writing no later than <b>30</b> days prior to filing this request:
→ List below the Alderperson, Neighborhood Association(s), B	·
Alder Tim Bruer; Notification Provided on 11/4/10; Waive	r provided on 11/4/10 - see attached
NOTE: If the alder has granted a waiver to this requirement, pl	lease attach any such correspondence to this form.
Pre-application Meeting with staff: Prior to preparation proposed development and review process with Zoning	on of this application, the applicant is required to discuss the and Planning Division staff; note staff persons and date.
Planning Staff: Tim Parks Date: 06/10/10	Zoning Staff: Pat Anderson Date: 06/10/10
☐ Check here if this project will be receiving a public	
The signer attests that this form is accurately comple	eted and all required materials are submitted:
Printed Name Brad Carlson	Date 12/01/2010
Signature	Relation to Property Owner Owns 2 of the 6 parcels

Date 12/01/2010

Authorizing Signature of Property Owner