

LAND USE APPLICATION

CITY OF MADISON

- · 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

Completion

ASAP

and site restored to grasslands

Development Schedule: Commencement

tadison _m			FOR OFF	ICE LISE ONLY	
215 Martin Luther King Jr. Blvd; Room LL-100 PO Box 2985; Madison, Wisconsin 53701-2985 Phone: 608.266.4635 Facsimile: 608.267.8739			FOR OFFICE USE ONLY: Amt. Paid 600 Receipt No. 455347 Date Received 6/24/14 Received By 70A. Parcel No. 07/0-04/-0/03-7 Aldermanic District 15 0AVIO AHREWS		
 All Land Use Applications should be filed with the Zor Administrator at the above address. 		ning	Aldermanic District	DAVID AH	REWS
 The following information is required for all applications. Commission review except subdivisions or land divisions should be filed using the <u>Subdivision Application</u>. 			Zoning District	15T- C.V.	
 This form may also be co- www.cityofmadison.com 	mpleted online at: /developmentcenter/landde	evelopment	Urban Design Commissi Common Council Form Effective:	on Plan Comr Other: February 21, 2013	
1. Project Address:	4202 Milwaukee St., Madiso	on, WI 53714			
Project Title (if any):	Former PDQ Site Demo (Cu	urrent Owner -	Dental Health Associate	s)	
 □ Major Amendmen □ Review of Alteration □ Conditional Use, o ☑ Demolition Permit ☑ Other Requests: 	dment from t to Approved PD-GDP Zonion to Planned Development r Major Alteration to an Ap //ill restore to grasslands	ng t (By Plan Con proved Condit	Major Amendment to A nmission) tional Use	pproved PD-SIF	P Zoning
Applicant Name: Andrew V			nny: Krupp General Contr	actors	
	ersity Row.	City/State: _	Madison, WI	Zip:	53705
Telephone: (608) 260-7003	3 Fax: () <u>N/A</u>		Email: andrew@krupp	pconstruction.co	om
Project Contact Person: SAM	E AS ABOVE	Compa	any:		
Street Address:		City/State:		Zip:	
Telephone: ()	Fax: ()		Email:		
Property Owner (if not applicar	t): Michael Haas - Facilitie	s Manager (De	ental Health Associates) F	P: 608.443.4955	5
	el Valley Rd.		Fitchburg, WI	Zip:	53711
4. Project Information: Provide a brief description	of the project and all propo	osed uses of th	ne site: Buildings / C&G	, Pavements to	be demo'd

2-3 Week Duration

All Land Use applications are required to include the following:
✓ Project Plans including:*
 Site Plans (<u>fully dimensioned</u> plans depicting project details including all lot lines and property setbacks to building demolished/proposed/altered buildings; parking stalls, driveways, sidewalks, location of existing/proposed signag 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: (32) per Heather Stouder
• 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 (2:4 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 ½ X 11-inch paper
* For projects requiring review by the Urban Design Commission , provide Fourteen (14) additional 11x17 copies of the place set. In addition to the above information, <u>all</u> plan sets should also include: 1) Colored elevation drawings with shadow line and a list of exterior building materials/colors; 2) Existing/proposed lighting with photometric plan & fixture cutsheet; ar 3) Contextual site plan information including photographs and layout of adjacent buildings and structures. The applica shall <u>bring</u> 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 Existing Conditions Project Schedule Proposed Uses (and ft² of each) Hours of Operation Filing Fee: Refer to the Land Use Application Instructions & Fee Schedule Value of Land Estimated Project Cost Number of Dwelling Units Estimated Project Cost Number of Construction & Full-Time Equivalent Jobs Created Public Subsidy Requested
Electronic Submittal: All applicants are required to submit copies of all items submitted in hard copy with their application Adobe Acrobat PDF files on a non-returnable CD to be included with their application materials, or by e-mail pcapplications@cityofmadison.com .
Additional Information may be required, depending on application. Refer to the Supplemental Submittal Requirement
6. Applicant Declarations
Pre-application Notification: The Zoning Code requires that the applicant notify the district alder and any nearly 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: Completed and sent to City of Madison
→ 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: Heather Stouder Date: 06/02/14 Zoning Staff: Pat Anderson Date: 06/02/14
ok'd per Michael Haas w/ DHA The applicant attests that this form is accurately completed and all required materials are submitted:
The applicant attests that this form is accurately completed and all required materials are submitted:
Name of Applicant Andrew Wojnicz Relationship to Property: General Contractor
Name of Applicant Andrew Wojnicz Relationship to Property: General Contractor Authorizing Signature of Property Owner **Relationship to Property: Date 14-14-14

5. Required Submittal Information