LAND USE APPLICATION	FOR OFFICE USE ONLT.		
Madison Plan Commission	Amt. Paid STO — Receipt No. 63099 Date Received 7-27-05 Received By MA WT Parcel No.		
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 <u>required</u> for all applications	Aldermanic District		
for Plan Commission review.	GQ		
Please read all pages of the application completely and	Zoning District		
fill in all required fields.	For Complete Submittal		
This application form may also be completed online at	Application \(\) Letter of Intent \(\) Legal Descript. \(\) Plan Sets \(\) Zoning Text \(\) Alder Notification \(\) Waiver \(\) Ngbrhd. Assn Not. \(\) Waiver \(\) Date Sign Issued \(\frac{7}{27-05} \)		
www.cityofmadison.com/planning/plan.html			
 All zoning application packages should be filed directly 			
with the Zoning Administrator's desk.			
All applications will be reviewed against the applicable			
standards found in the City Ordinances to determine if the project can be approved.			
ι το ρι ομού σαι του αρριονού.	7-2/0		
1. Project Address: 523 State St	Project Area in Acres: /5 +2 6		
Project Title (if any): Backyard Patos	Avec (Mondays)		
2. This is an application for: (check at least one)	,		
	aroning and fill in the blanks accordingly		
Zoning Map Amendment (check only ONE box below for re	ггонну ана ни не ріанку ассогандіў)		
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 Demolition Permit C	Other Requests (Specify):		
	7		
3. Applicant, Agent & Property Owner Information:			
Applicant's Name: Gary Garten (Company: Orbutou State the DBA Mo		
Street Address: 523 State City/State	te: Madison Zip: 53703		
Telephone: (608) 575-6881 Fax: ()			
	•		
Project Contact Person: Gary Garton (Company: Mondays		
Street Address: 523 State 5+ City/State	te: Mad 1104 Zip: 53703		
Telephone: (609) メファー6381 Fax: ()			
Property Owner (if not applicant):			
Street Address: 5662 Dorcas Cir City/Stat	te: Orgon Zip:		
4. Project Information:			
Provide a general description of the project and all proposed uses	s of the site:		
	· ·		
	Completion		
Development Schedule: Commencement	(`a man late a m		

					and the second		
5.	Required Submittals:				The second secon		
Ø							
	• Seven (7) copies of a full-sized p	lan set drawn to a scal	e of one inch equals 2	20 feet (collated an	d folded)		
	• Seven (7) copies of the plan set	reduced to fit onto 11 ir	nch by 17 inch paper ((collated, stapled a	nd folded)		
	• One (1) copy of the plan set redu	ced to fit onto 8 ½ inch	by 11 inch paper		ŧ		
Ø	Letter of Intent: Twelve (12) copie and uses of the property; develop landscaper, business manager, etc. acreage of the site; number of dw building(s); number of parking stalls	ment schedule for the); types of businesses; elling units; sale or rei	project; names of p number of employees	ersons involved (os; hours of operation	contractor, architect, on; square footage or		
	Legal Description of Property: Lo	ot(s) of record or metes	and bounds descript	ion prepared by a l	and surveyor.		
V	Filing Fee: \$500,00 See the fee	e schedule on the appli	cation cover page. M	ake checks payabl	e to: City Treasurer.		
IN ADDITION, THE FOLLOWING ITEMS MAY ALSO BE REQUIRED WITH YOUR APPLICATION; SEE BELOW:							
	For any applications proposing demo- be submitted with your application. Coordinator is required to be approve	Be advised that a Re	euse and Recycling i	Plan approved by	be demolished shall the City's Recycling		
	A project proposing ten (10) or more requirements outlined in Section 28.0 application detailing the project's cor application form. Note that some ID	04 (25) of the Zoning Or Informance with these of	dinance. A separate IN dinance requirements	NCLUSIONARY DW s shall be submitted	/ELLING UNIT PLAN		
	A Zoning Text must accompany all	Planned Community or	Planned Unit Develo	pment (PCD/PUD)	submittals.		
app Acr pca	R ALL APPLICATIONS: All application (including this application for obat PDF files compiled either on a nepplications@cityofmadison.com. The provide the materials electronically should be application of the materials.	m, the letter of intent, co on-returnable CD to be e e-mail shall include the	omplete plan sets and included with their ap e name of the project	elevations, etc.) as plication materials, and applicant. Appli	INDIVIDUAL Adobe or in an e-mail sent to cants who are unable		
6	Applicant Declarations:						
П	Conformance with adopted City p	lans: Applications sha	Il be in accordance w	rith all adopted City	of Madison plans:		
	→ The site is located within the limits				which recommends:		
•		1.4			for this property.		
	Pre-application Notification: Sectionary nearby neighborhood or business	on 28.12 of the Zoning (ss associations by mail	Ordinance requires that no later than 30 days	at the applicant notif s prior to filing this	y the district alder and request:		
	→ List below the Alderperson, Neighb						
	7-27-05, Alde mile	Verveer wairs	hotificator (nut			
	If the alder has granted a waiver to this						
	Pre-application Meeting with star proposed development and review p	process with Zoning Co	ounter and Planning U	Jnit staff; note staff	persons and date.		
	PlannerL	DateZ	oning StaffMA_	* Theken	Date 7-26-05		
The signer attests that this form has been completed accurately and all required materials have been submitted:							
Pri	nted Name Gary Ga	o ten	nganggamanan antarakan panahan antarak Militaraha	Date	7-25-05		
Printed Name Gary Garten Date 7-25-05 Signature Relation to Property Owner Textuant (20 405)							
	\sim	12	8				
Aut	horizing Signature of Property Owner	July 1	in Ju	Date _	7-27-05		