

SUBDIVISION 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 Date Stamp

** Please read both pages of the application completely and fill in all required fields**

This application form may also be completed online at www.cityofmadison.com/planning/plan.html

	-		
1a. Application Type. (Choose ONE)		
Preliminary Subdivision Plat	Final Subdivision Plat	Land Division/ Certified	Survey Map (CSM)
If a Plat, Proposed Subdivision Name:		·········	
1b. Review Fees. Make checks payable	to "City Treasurer."		-
For Preliminary and Final Plats , an		35 per lot and outlot contained on	the plat drawing
For Certified Survey Maps , an appli			
2. Applicant Information.	, , , , , , , , , , , , , , , , , , , ,		,,
Name of Property Owner: PREMIUM	QEAL FSTATE LLC Represer	tative if any: new Especies	
Street Address: <u>GSO/ SOUT H/ TO</u>	·		
Telephone: (608) ZZ6-3/40	•	,	
100phone. (20%) 200 3/100 1	1207 223 0737	DESFORTION DESFORT	0/70/10/10/10/10/10/10/10/10/10/10/10/10/10
Firm Preparing Survey: <u>D'onof R 10</u>			
Street Address: 7530 WEST WAY			
Telephone: (608) 833-7530	Fax: <u>(608) 833-/089</u>	_ Email: <u>kpape e olenafi</u>	10- CC
Check only ONE - ALL Correspondence on the contract of the con	this application should be sent to:	Property Owner X Su	ırvey Firm
3a. Project Information.			
Parcel Address: 613 HERCULES	TRAIL	in the City or Town of: MAD15	son
Tax Parcel Number(s): <u>つう/0 / / この</u> 8	School District: MADISON		
Existing Zoning District(s): PUD S III	<i>o</i>	Development Schedule: Same	ER 7006
Proposed Zoning District(s) (if any):		Provide a Legal Description of	Site on Reverse Side
3b. For Surveys Located Outside t	he Madison City Limits ar	nd in the City's Extraterrito	rial Jurisdiction:
Date of Approval by Dane County:	Date	of Approval by Town:	
In order for an exterritorial request to be accep	oted, a copy of the approval letters	from <u>both</u> the town and Dane County	must be submitted.
Is the subject site proposed for annexation?	No Yes If YES, ap	proximate timeframe:	
4. Survey Contents and Description	on. Complete table as it pertains	to the survey; do not complete gray a	ıreas.
Land Use Lots O	utlots Acres Descr	ibe the use of the lots and outlots	on the survey
Residential Z	0.11	adet ingelen in dem general stelle det ekke interfere interfere de	ent for the first to be the content of the content
Retail/Office			
Industrial			
Outlots Dedicated to City			
Homeowner Assoc. Outlots			
Other (state use)			
TOTAL			OVER →

\boxtimes	Su	irveys (prepared by a Reg	gistered Land Surveyor):			. •
, Câmina	•	required to provide all in (7)(a) of the Madison Ge existing site conditions a (denote field located version lots and outlots, width information necessary for	eighteen (18) copies of the information as it pertains to the eneral Ordinances. The drawing and natural features, delineates us record drawings), the genths of existing and proposed or the review of the proposed segments.	he proposed sings shall includion of all publication of all publication of the rights of way, subdivision.	subdivision as set forth in de, but are not limited to, ic and private utilities the he proposed subdivision topographic information	n Section 16.23 a description of at serve the site the dimensions , and any other
	•	For <u>Final Plats</u> , sixteen (to the specifications of Se	(16) copies of the drawing are ection 236.20 of the Wisconsi	e required to be n Statutes.	e submitted. The final pla	t shall be drawn
	•	include all of the information	aps (CSM), sixteen (16) copation set forth in Sections 16. conditions, the nature of the por from utility maps) may be p	23 (7)(a) and oroposed land	(d) of the Madison Gene division and any other i	eral Ordinances, necessary data
		All surveys submitted wit 8 1/2" X 14" case file. In a	h this application are required addition, an 8-½ X 11 inch red	to be <u>collated</u> duction of eac	, stapled and folded so a th sheet must also be su	s to fit within an bmitted.
	app Ma Title pol app	proval shall include a Repo dison General Ordinances e shall be obtained from a icy is NOT acceptable (plicant must deliver a thir	ting Documents: All plats and ort of Title satisfactory to the Fig. A minimum of two (2) copies local, reputable title insurant (i.e. a Preliminary Title Report of Title of all documents listed in the local of all documents listed in the local or the local or all documents listed in the local or the loc	Real Estate Dives of the City of the City of the City of the company. It or a Record to the surve	rision as required in Sect f Madison standard 60/30 Title insurance or a titl I Information Certificate) ev firm preparing the pla	ion 16.23 of the year Report of commitment. The owner or t or CSM. The
CAASE	it is Ord	required to comply with t inance. A separate <i>INC</i>	Plats ONLY: If the proposed the City's Inclusionary Zoning CLUSIONARY ZONING DWE ese ordinance requirements s	requirements ELLING UNIT	under Section 28.04 (25 PLAN APPLICATION) of the Zoning
Tabasas and the same of the sa	offe	r, including all terms of th	lential Lots: The applicant so e purchase and any other inf in determining Fair Market Va	ormation that r	may be deemed necessa	rv by the Real
Agencies	prop	perty is located and Dane	adison City Limits: A copy of County must be submitted with its first had jurisdiction without it first had been supported by the country of	h your request	The City of Madison ma	av not consider
	requ	iired if any interest in the	nd to the Public: A Phase se lands are to be conveyed for a determination as soon a	to the public.	ental Site Assessment F Please contact the City	leport may be 's Real Estate
\bowtie	Con to "C	npleted application and li	required Fee (from Section	1b on front):	\$ <u>500</u> Make all o	checks payable
X	lega com to <u>po</u>	l description and prelimina piled either on a non-retul capplications@cityofmadis	nittal: All applicants are requir ary and/or final plats or certific rnable CD-ROM to be include son.com. The e-mail shall incl s electronically should contact	ed survey map ed with their ap ude the name	o as individual Adobe Act oplication materials, or in of the project and applic	obat PDF files an e-mail sent ant. Applicants
			has been completed accurate			submitted:
Applica	ant's	Printed Name <u>KEVIII</u>	PAPE	Signature_	fin face	
Date _		6/23/06	Interest In Property O	n This Date _	SURVEYCR	
or Offic	e Us	e Only Date Recid:	PC Date	Alder: District	. Amount Paid:	s

5. Required Submittals. Your application is required to include the following (check all that apply):