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LAND USE APPLICATION	FOR OFFICE USE ONLY:
Madison Plan Commission	Amt. Paid Receipt No.
215 Martin Luther King Jr. Blvd; Room LL-100	Date Received 8/4/16
PO Box 2985; Madison, Wisconsin 53701-2985	Received By
Phone: 608.266.4635   Facsimile: 608.267.8739	Parcel No. 0708-242-1213-1
The following information is required for all applications for Plan     Control of the property of the plant of the p	Aldermanic District 19 - CLEAR  GQ 02
Commission review except subdivisions or land divisions, which should be filed with the <u>Subdivision Application</u> .	Zoning District A
• Before filing your application, please review the information regarding the <b>LOBBYING ORDINANCE</b> on the first page.	For Complete Submittal Application Letter of
<ul> <li>Please read all pages of the application completely and fill in all required fields.</li> </ul>	Intent  Legal Descript.
<ul> <li>This application form may also be completed online at www.cityofmadison.com/planning/plan.html</li> </ul>	Plan Sets Zoning Text
<ul> <li>All Land Use Applications should be filed directly with the Zoning Administrator.</li> </ul>	Alder Notification 7/30/2010 Waiver  Ngbrhd. Assn Not. 7/32/2010 Waiver
	Date Sign Issued
6901 Old Jack C	4. Project Aven in Acres
1. Project Address:	Project Area in Acres:
Project Title (if any):	
2. This is an application for:	
Zoning Map Amendment (check the appropriate box(es) in only one of the columns below)	
Rezoning to a Non-PUD or PCD Zoning Dist.: Rezon	ning to or Amendment of a PUD or PCD District:
Existing Zoning: A to E	Ex. Zoning: A to PUD/PCD-GDP
Proposed Zoning (ex: R1, R2T, C3):	Ex. Zoning: A to PUD/PCD-SIP
	Amended Gen. Dev.
☐ Conditional Use ☐ Demolition Permit ☐ G	Other Requests (Specify):
Conditional ose	
3. Applicant, Agent & Property Owner Information:	
Applicant's Name: Kimberly A Santiago Co	ompany:
Street Address: 6901 Old Sauk Ct. City/State	:Madison WI zip: 53717
Telephone: (608) 833-5251 Fax: ( )	Email: kimsantiago@yahoo.com
Project Contact Person: Kimbury & Janhapo C	ompany:
Street Address: 490 C/N Saik Ct City/State	e: Nevien W/ Zip: 53717  Email: Kim Sonther O yether com
Telephone: (408) \$33-\^25' Fax: ( )	Email: Kom Southage @ yocher. com
Property Owner (if not applicant):	
	z: Zip:
4. Project Information:	
4. Project Information:  Provide a brief description of the project and all proposed uses of the site:  From Remodeling and Edvisor for le distance of the Development Schedule: Commencement  MA  Completion  MA	
for free Remodelina and Eddito	n . fo be ditekmined
Development Schedule: Commencement	Completion 4/A

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Date \_\_\_

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5. Required Submittals:	
Plans submitted as follows below and depicts all lot lines; existing, altered, parking areas and driveways; sidewalks; location of any new signs; existing elevations and floor plans; landscaping, and a development schedule desc	g and proposed utility locations; building cribing pertinent project details:
• 7 copies of a full-sized plan set drawn to a scale of one inch equals 20	
• 7 copies of the plan set reduced to fit onto 11 inch by 17 inch paper (co	ollated, stapled and folded)
• 1 copy of the plan set reduced to fit onto 8 ½ inch by 11 inch paper	
Letter of Intent (12 copies): describing this application in detail including conditions and uses of the property; development schedule for the project; architect, landscaper, business manager, etc.); types of businesses; nun square footage or acreage of the site; number of dwelling units; sale or resequere footage of building(s); number of parking stalls, etc.	; names of persons involved (contractor, nber of employees; hours of operation;
Legal Description of Property: Lot(s) of record or metes and bounds description any application for rezoning, the description must be submitted as an electroapplications proposing rezoning to more than one district, a separate description	onic word document via CD or e-mail. For iption of each district shall be submitted.
Filing Fee: \$ N/A See the fee schedule on the application cover page.	Make checks payable to: City Treasurer.
Electronic Submittal: All applicants are required to submit copies of all application (including this application form, the letter of intent, complete Acrobat PDF files on a non-returnable CD to be included with their applications@cityofmadison.com. The e-mail shall include the name of the to provide the materials electronically should contact the Planning Division	items submitted in hard copy with their plan sets and elevations, etc.) as Adobe cation materials, or in an e-mail sent to e project and applicant. Applicants unable
In Addition, The Following Items May Also Be Required With Your App	olication:
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 his/her agent is repersons registered with the City 30 or 60 days prior to filing their atool found at: </li></ul>	

Authorizing Signature of Property Owner \_\_\_

Effective May 1: 2009