

11:07

# ZONING 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.
- Please read all 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](http://www.cityofmadison.com/planning/plan.html)
- All zoning application packages should be filed directly with the Zoning Administrator's desk.
- Application effective February 18, 2005

### FOR OFFICE USE ONLY:

Amt. Paid 550 - Receipt No. \_\_\_\_\_  
 Date Received 6/22/05  
 Received By MDP  
 Parcel No. 0609-022-030-9  
 Aldermanic District 14-BRUER  
 GQ OK  
 Zoning District M1  
**For Complete Submittal**  
 Application  Letter of Intent   
 IDUP  Legal Descript.   
 Plan Sets  Zoning Text   
 Alder Notification Pending Waiver \_\_\_\_\_  
 Ngrhd. Assn Not. No Waiver \_\_\_\_\_  
 Date Sign Issued 6-22-05

1. **Project Address:** 809 Watson Avenue **Project Area in Acres:** 2.064 Acres  
**Project Title (if any):** Badgerland Supply, Inc.

2. **This is an application for:** (check at least one)

<input type="checkbox"/> <b>Zoning Map Amendment</b> (check only ONE box below for rezoning and fill in the blanks accordingly)	
<input type="checkbox"/> Rezoning from _____ to _____	<input type="checkbox"/> Rezoning from _____ to PUD/PCD-SIP
<input type="checkbox"/> Rezoning from _____ to PUD/PCD-GDP	<input type="checkbox"/> Rezoning from PUD/PCD-GDP to PUD/PCD-SIP
<input type="checkbox"/> <b>Conditional Use</b>	<input checked="" type="checkbox"/> <b>Demolition Permit</b>
<input type="checkbox"/> <b>Other Requests</b> (Specify): _____	

3. **Applicant, Agent & Property Owner Information:**

Applicant's Name: Jim Downing Company: Badgerland Supply, Inc.  
 Street Address: 809 Watson Avenue City/State: Madison, WI Zip: 53713  
 Telephone: (608) 274-6630 Fax: (608) 274-6359 Email: \_\_\_\_\_

Project Contact Person: Colin Godding, AIA Company: Architecture/CSG, Inc.  
 Street Address: 107 N. Hamilton St. City/State: Madison, WI Zip: 53703  
 Telephone: (608) 251-4402 Fax: (608) 251-4471 Email: cgodding@architecturecsg.com

Property Owner (if not applicant): \_\_\_\_\_  
 Street Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

4. **Project Information:**

Provide a general description of the project and all proposed uses of the site: Project includes demolition of a one-story metal building to be replaced by a one-story metal building for storing gypsum wallboard. Some site work including new parking areas, retaining wall, grading and landscaping.  
 Development Schedule: Commencement Fall 2005 Completion Spring 2006

**5. Required Submittals:**

**Site Plans** submitted as follows below and depicts all lot lines; existing, altered, demolished or proposed buildings; parking areas and driveways; sidewalks; location of any new signs; existing and proposed utility locations; building elevations and floor plans; landscaping, and a development schedule describing pertinent project details:

- **Seven (7) copies** of a full-sized plan set drawn to a scale of one inch equals 20 feet (collated and folded)
- **Seven (7) copies** of the plan set reduced to fit onto 11 inch by 17 inch paper (collated, stapled and folded)
- **One (1) copy** of the plan set reduced to fit onto 8 ½ inch by 11 inch paper

**Letter of Intent: Twelve (12) copies** describing this application in detail but not limited to, including: existing conditions and uses of the property; development schedule for the project; names of persons involved (contractor, architect, landscaper, business manager, etc.); types of businesses; number of employees; hours of operation; square footage or acreage of the site; number of dwelling units; sale or rental price range for dwelling units; gross square footage of building(s); number of parking stalls, etc.

**Legal Description of Property:** Lot(s) of record or metes and bounds description prepared by a land surveyor.

**Filing Fee:** \$ 600.00 See the fee schedule on the application cover page. Make checks payable to: *City Treasurer.*

**IN ADDITION, THE FOLLOWING ITEMS MAY ALSO BE REQUIRED WITH YOUR APPLICATION; SEE BELOW:**

For any applications proposing demolition of existing (principal) buildings, photos of the structure(s) to be demolished shall be submitted with your application. Be advised that a *Reuse and Recycling Plan* approved by the City's Recycling Coordinator is required to be approved by the City prior to issuance of wrecking permits.

A project proposing **ten (10) or more dwelling units** may be required to comply with the City's Inclusionary Zoning requirements outlined in Section 28.04 (25) of the Zoning Ordinance. A separate **INCLUSIONARY DWELLING UNIT PLAN** application detailing the project's conformance with these ordinance requirements shall be submitted concurrently with this application form. Note that some IDUP materials will coincide with the above submittal materials.

A *Zoning Text* must accompany **all** Planned Community or Planned Unit Development (PCD/PUD) submittals.

**FOR ALL APPLICATIONS:** All applicants are required to submit copies of all items submitted in hard copy with their application (including this application form, the letter of intent, complete plan sets and elevations, etc.) as **INDIVIDUAL** Adobe Acrobat PDF files compiled either on a non-returnable CD to be included with their application materials, or in an e-mail sent to [pcapplications@cityofmadison.com](mailto:pcapplications@cityofmadison.com). The e-mail shall include the name of the project and applicant. Applicants who are unable to provide the materials electronically should contact the Planning Unit at (608) 266-4635 for assistance.

**6. Applicant Declarations:**

**Conformance with adopted City plans:** Applications for Zoning Map Amendments shall be in accordance with all adopted City of Madison land use plans:

→ The site is located within the limits of \_\_\_\_\_ Plan, which recommends:

\_\_\_\_\_ for this property.

**Pre-application Notification:** Section 28.12 of the Zoning Ordinance requires that the applicant notify the district alder and any nearby neighborhood or business associations by mail no later than **30** days prior to filing this request:

→ List below the Alderperson, Neighborhood Association(s), Business Association(s) AND dates you sent the notices:

Timothy Bruer 6/20/05

If the alder has granted a waiver to this requirement, please attach any such correspondence 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 Counter and Planning Unit staff; note staff persons and date.

Planner Brad Murphy Date 6/10/05 | Zoning Staff Kathy Voeck Date 6/10/05

**The signer attests that this form has been completed accurately and all required materials have been submitted:**

Printed Name COLIN B. GOODING Date 06/21/05

Signature [Signature] Relation to Property Owner ARCHITECT

Authorizing Signature of Property Owner [Signature] Date 6/21/05