LAND USE APPLICATION	FOR OFFICE USE ONLY:
Madison Plan Commission	Amt. Paid # 1430 - Receipt No. 7850(
215 Martin Luther King Jr. Blvd; Room LL-100	Date Received 2-7-07
PO Box 2985; Madison, Wisconsin 53701-2985	Received By Wwith
Phone: 608.266.4635 Facsimile: 608.267.8739	Parcel No.
 The following information is <u>required</u> for all applications for Plan Commission review. 	Aldermanic District (- 5 el SAmbro
 Please read all pages of the application completely and fill in all required fields. 	Zoning District Pub-GDP For Complete Submittal
 This application form may also be completed online at <u>www.cityofmadison.com/planning/plan.html</u> 	Application Letter of Intent IDUP Legal Descript
 All zoning application packages should be filed directly with the Zoning Administrator's desk. 	Plan Sets Zoning Text Alder Notification
All applications will be reviewed against the applicable	Ngbrhd, Assn Not. Waiver
standards found in the City Ordinances to determine if the project can be approved.	Date Sign Issued 2-7-07
the project can be approved.	
1. Project Address: 8133 Mansion Hill Avenue	Project Area in Acres: 2
Mid Town Commons	
Project Title (if any):	
2. This is an application for: (check at least one)	
Zoning Map Amendment (check only ONE box below for re	ezoning and fill in the blanks accordingly)
Rezoning from PUD/GDP to PUD-GDP/SIP	Rezoning from to PUD/ PCD-SIP
A 10D-GD17 D11	Rezoning from PUD/PCD—GDP to PUD/PCD—SIP
Rezoning from to PUD/ PCD-GDP	Rezolling Holli Pobli Cb-GbF to 1 Cbil Gb 'dil
Conditional Use Demolition Permit	Other Requests (Specify):
3. Applicant, Agent & Property Owner Information:	
	Company: Amden, LLC
	te: Madison, WI zip: 53719
0.0000	
Telephone: (608) 250-2482 Fax: ()	Email:
Project Contact Person: Josh Kopp	Company: Lathrop & Clark, LLP
	te: Madison, WI Zip: 53715
Telephone: (608) 257-7766 Fax: (608) 257-1507	Email: jkopp@lathropclark.com
Property Owner (if not applicant): WC Development Corporation	
Street Address: 625 N. Segoe Road City/Sta	te: Madison, WI Zip: 53705
4. Project Information:	cof the site. Construction of a single building to be
Provide a general description of the project and all proposed use	S OF the site.
used as a day care center, with a coffee/bagel shop as an ancilla	ary use

5.	Required Submittals:	
K	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:	
	Cover (7) confec 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	
X	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.	-
X	Legal Description of Property: Lot(s) of record or metes and bounds description prepared by a land surveyor.	
V	Filing Fee: \$ 1,450.00 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.	
X	A Zoning Text must accompany all Planned Community or Planned Unit Development (PCD/PUD) submittals.	
ap Ac <u>pca</u> to	R ALL APPLICATIONS: All applicants are required to submit copies of all items submitted in hard copy with their lication (including this application form, the letter of intent, complete plan sets and elevations, etc.) as INDIVIDUAL Adobe obat PDF files compiled either on a non-returnable CD to be included with their application materials, or in an e-mail sent to pplications@cityofmadison.com. The e-mail shall include the name of the project and applicant. Applicants who are unable rovide the materials electronically should contact the Planning Unit at (608) 266-4635 for assistance.)
-	Applicant Declarations:	
X	Conformance with adopted City plans: Applications shall be in accordance with all adopted City of Madison plans:	
	→ The site is located within the limits of High Point-Raymond Neighborhood Development, which recommends:	
	Institutional Mixed Use for this property.	
X	SILV HEALDY REIGHBOURGE OF PROFITOR ASSESSMENT A	i
	→ List below the Alderperson, Neighborhood Association(s), Business Association(s) AND dates you sent the notices:	
	Waiver attached	-
	If the alder has granted a waiver to this requirement, please attach any such correspondence to this form.	
X	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 Bill Roberts Date 1/11/2007 Zoning Staff Matt Tucker Date 1/11/07	
	e signer attests that this form has been completed accurately and all required materials have been submitted:	
Th	$\frac{1}{2}$	
		_
Pr	nted Name JOS N ROPP, Afformy for Applicant Date 2/0/01	
	nature Relation to Property Owner Attorney for Buyer	<u>_</u>
SI	nted Name Relation to Property Owner Att Ny for Buyer	<u>_</u> _