

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 except subdivisions or land divisions, which should be filed with the Subdivision Application.
- Before filing your application, please review the information regarding the LOBBYING ORDINANCE on the first page.
- Please read all pages of the application completely and fill in all required fields.

| -  |                        |                |           |  |  |  |  |  |
|--|------------------------|----------------|-----------|--|--|--|--|--|
| FOR OFFICE USE ONLY:                     |                        |                |           |  |  |  |  |  |
|  | Amt. Paid              |                | Receipt N | 0.   |  |  |  |  |
|  | Date Received          |                |           |  |  |  |  |  |
|  | Received By            |                |           |  |  |  |  |  |
|  | Parcel No.             |                |           |  |  |  |  |  |
|  | Aldermanic District    | s              |           |  |  |  |  |  |
|  | GQ                     |                |           |  |  |  |  |  |
|  | Zoning District        |                |           |  |  |  |  |  |
|  | For Complete Submittal |                |           |  |  |  |  |  |
|  | Application            | L              | etter of  |  |  |  |  |  |
|  | Webber 1 Section       |                | ntent     | Manage Action 1 to 1 |  |  |  |  |
|  | IDUP                   | L              | egal Des  | cript  |  |  |  |  |
|  | Plan Sets              | Z              | oning Te  | xt   |  |  |  |  |
|  | Alder Notification     |                | Wa        | iver   |  |  |  |  |
|  | Ngbrhd. Assn Not       |                | Wa        | iver   |  |  |  |  |
|  | Date Sign Issued       |                |           |  |  |  |  |  |
|  | Project Area           | a in           | Acres:    | 1.8585   |  |  |  |  |
|  | ility                  | 4 111          | Aci CS.   |  |  |  |  |  |
| ac                                       | ility                  |                |           |  |  |  |  |  |
|  |                        |                |           |  |  |  |  |  |
| of t                                     | the columns below)     |                |           |  |  |  |  |  |
| na                                       | to or Amendment        | of :           | DIID      | r PCD District:                                    |  |  |  |  |
|  |                        |                |           |  |  |  |  |  |
|  |                        | to PUD/PCD-GDP |           |  |  |  |  |  |
| . Zoning:                                |                        |                |           | to PUD/PCD-SIP                                     |  |  |  |  |
| nended Gen. Dev. Amended Spec. Imp. Plan |                        |                |           |  |  |  |  |  |
| her Requests (Specify):                  |                        |                |           |  |  |  |  |  |
|  |                        |                |           |  |  |  |  |  |
|  |                        |                |           | •  |  |  |  |  |
| npany: University of Wisconsin-Madison   |                        |                |           |  |  |  |  |  |
| Лac                                      | dison, WI              |                | Zip:      | 53726  |  |  |  |  |
| . E                                      | mail: gbrown@fpm.      | wisc           | .edu      |  |  |  |  |  |
| npany: University of Wisconsin-Madison   |                        |                |           |  |  |  |  |  |
|  | dison, WI              |                |           | 53726  |  |  |  |  |
| -  | . 01                   | wisc           | Zip:      |  |  |  |  |  |
| - E                                      | mail: gprown@fpm.      |                |           |  |  |  |  |  |
|  |                        |                |           |  |  |  |  |  |
| Vlad                                     | dison, WI              |                | Zip:      | 53706  |  |  |  |  |
|  |                        |                |           |  |  |  |  |  |
|  |                        |                |           |  |  |  |  |  |
| LI                                       | atter.                 |                |           |  |  |  |  |  |

|   | IDOP Legal Descript.                               |
|---|--|
| <ul> <li>This application form may also be completed owww.cityofmadison.com/planning/plan.html</li> </ul> | online at Plan Sets Zoning Text                    |
| All Land Use Applications should be filed directly  | with the Alder Notification Waiver                 |
| Zoning Administrator.   | Ngbrhd. Assn Not. Waiver                           |
| •   | Date Sign Issued                                   |
|   |  |
| 1. Project Address: 9002 County Road PD   | Project Area in Acres: 1.8585                      |
| Project Title (if any): UW Madison All-Season Go  | If Practice Facility                               |
|   |  |
| 2. This is an application for:  |  |
| Zoning Map Amendment (check the appropriate box(es)   | in only one of the columns below)                  |
| ☐ Rezoning to a <u>Non</u> -PUD or PCD Zoning Dist.:  | Rezoning to or Amendment of a PUD or PCD District: |
| Existing Zoning: to   | Ex. Zoning: to PUD/PCD-GDP                         |
| Proposed Zoning (ex: R1, R2T, C3):  | Ex. Zoning: to PUD/PCD-SIP                         |
|   | ☐ Amended Gen. Dev. ☐ Amended Spec. Imp. Plan      |
| ✓ Conditional Use   | Other Requests (Specify):                          |
|   |  |
| 3. Applicant, Agent & Property Owner Inform  Applicant's Name:  Street Address:  610 Walnut Street        | Company: University of Wisconsin-Madison           |
| Telephone: (608) 263-3023 Fax: (608) 265-31   |  |
|   | Company: University of Wisconsin-Madison           |
| 610 Walnut Street   | Madison WI 53726                                   |
| Street Address: 610 Walnut Street   |  |
| Telephone: (608)263-3023 Fax: (608)265-31   | Email: gbrown@tpm.wisc.edu                         |
| Property Owner (if not applicant): Board of Regents of the U  | JW System  |
| Charact Address: 1220 Linden Drive  | City/Chata Madison, WI                             |
| Street Address: 1220 Linden Dive  | City/State: Madison, WI Zip: 53706                 |
| 4. Project Information:   |  |
| Provide a brief description of the project and all propos   | ed uses of the site:                               |
| 2 Story, 11,600 GSF All-Season Practice Facility at the U   | Jniversity Ridge Golf Course                       |
| Development Schedule: Commencement September, 2   | 2012 Completion January, 2013                      |
|   |  |
|   |  |
|   |  |
|   |  |

|  |   | CONTINUE →  |  |  |  |  |  |
|--|---|---|--|--|--|--|--|
| 5.   | Required Submittals:  |   |  |  |  |  |  |
| Ĭ  | Plans submitted as follows below and depicts all lot lines; existing, altered, demolished or proposed by parking areas and driveways; sidewalks; location of any new signs; existing and proposed utility local elevations and floor plans; landscaping, and a development schedule describing pertinent project de **T copies** of a full-sized plan set drawn to a scale of one inch equals 20 feet (collated and folded) **T copies** of the plan set reduced to fit onto 11 inch by 17 inch paper (collated, stapled and folded) **1 copy** of the plan set reduced to fit onto 8 ½ inch by 11 inch paper | itions; building<br>etails:                         |  |  |  |  |  |
| M  | <b>Letter of Intent</b> (12 copies): describing this application in detail including, but not limited to: exconditions and uses of the property; development schedule for the project; names of persons involve architect, landscaper, business manager, etc.); types of businesses; number of employees; hours square footage or acreage of the site; number of dwelling units; sale or rental price range for dwelling square footage of building(s); number of parking stalls, etc.  | ed (contractor, s of operation;                     |  |  |  |  |  |
| Ø  | <b>Legal Description of Property:</b> Lot(s) of record or metes and bounds description prepared by a land any application for rezoning, the description must be submitted as an electronic word document via CD applications proposing rezoning to more than one district, a separate description of each district shall  | or e-mail. For                                      |  |  |  |  |  |
|  | <b>Filing Fee:</b> $\$DNA$ See the fee schedule on the application cover page. Make checks payable to: 0  | City Treasurer.                                     |  |  |  |  |  |
| Ø  | <b>Electronic Submittal:</b> All applicants are required to submit copies of all items submitted in hard of application (including this application form, the letter of intent, complete plan sets and elevations, and Acrobat PDF files on a non-returnable CD to be included with their application materials, or in an <a href="mailto:pcapplications@cityofmadison.com">pcapplications@cityofmadison.com</a> . The e-mail shall include the name of the project and applicant. Application to provide the materials electronically should contact the Planning Division at (608) 266-4635 for as          | etc.) as Adobe<br>e-mail sent to<br>plicants unable |  |  |  |  |  |
| In   | Addition, The Following Items May Also Be Required With Your Application:   |   |  |  |  |  |  |
|  | For any applications proposing demolition or removal of existing buildings, the following items are r   | -   |  |  |  |  |  |
| <ul> <li>Prior to the filing of an application, the applicant or his/her agent is required to notify a list of interested persons registered with the City 30 or 60 days prior to filing their application using the online notificati tool found at: <a href="https://www.cityofmadison.com/developmentCenter/demolitionNotification/">https://www.cityofmadison.com/developmentCenter/demolitionNotification/</a></li> </ul> |   |   |  |  |  |  |  |
|  | <ul> <li>A photo array (6-12 photos) of the interior and exterior of the building(s) to be demolished or<br/>written assessment of the condition of the building(s) to be demolished or removed is highly red</li> </ul>  | commended.  |  |  |  |  |  |
|  | <ul> <li>Note: A Reuse and Recycling Plan approved by the City's Recycling Coordinator is required prior of wrecking permits and the start of construction.</li> </ul>  | to issuance   |  |  |  |  |  |
|  | Zoning Text (12 copies): must accompany Planned Community or Planned Unit Development (PCI  | D/PUD) submittals.                                  |  |  |  |  |  |
|  | Applicant Declarations:   |   |  |  |  |  |  |
| Ш  | Conformance with adopted City plans: Applications shall be in accordance with all adopted City of l  → The site is located within the limits of Plan, which r   | Madison plans:<br>recommends:                       |  |  |  |  |  |
|  | for a   | this property.                                      |  |  |  |  |  |
| Ø  | <b>Pre-application Notification:</b> Section 28.12 of the Zoning Code requires that the applicant notify the and any nearby neighborhood & business associations in writing no later than <i>30</i> days prior to filing  |   |  |  |  |  |  |
|  | → List below the Alderperson, Neighborhood Association(s), Business Association(s) AND dates you sent the no Ald. Lisa Subeck, District 1 - waiver request attached   | tices:  |  |  |  |  |  |
|  | NOTE: If the alder has granted a waiver to this requirement, please attach any such correspondence to this form   | 7.  |  |  |  |  |  |
| Ĭ  | <b>Pre-application Meeting with staff:</b> <u>Prior</u> to preparation of this application, the applicant is required proposed development and review process with Zoning and Planning Division staff; note staff person  |   |  |  |  |  |  |
|  | Planning Staff: Brad Murphy Date: Various Zoning Staff: Matt Tucker Date:   | ate: 3/23/11  |  |  |  |  |  |
|  | Check here if this project will be receiving a public subsidy. If so, indicate type in your Letter  | of Intent.  |  |  |  |  |  |
| The signer attests that this form is accurately completed and all required materials are submitted:  |   |   |  |  |  |  |  |
| Pri  | inted Name Gary A Brown Date 01   | 17/12   |  |  |  |  |  |
| Sig  | gnature Say Somm Relation to Property Owner When y  | ep  |  |  |  |  |  |
| Au   | uthorizing Signature of Property Owner Hours Many Date 01/  | 17/12   |  |  |  |  |  |
|  | Effective May 1, 2009   |   |  |  |  |  |  |

Effective May 1, 2009