

PCAP-73-6

OWNER INFORMATION (IF DIFFERENT*)

101 W Main St Madison, IN 47250 (812) 265-8324

Application for Accessible Parking Plan

APPLICANT INFORMATION

Ad Fee (for Legal Notice)

\$ 15.00

Total Due

\$ 15.00

Purpose: Per the City of Madison Zoning Ordinance, the Plan Commission shall approve handicapped parking plan for all Commercial buildings. Off-street parking requirements are found within the City of Madison Zoning Ordinance Section 9.00. Parking shall conform with the requirements of the Americans with Disabilities Act.

This application must be filed <u>at least 15 days prior</u> to scheduled meeting to be eligible for consideration at that meeting. Actual deadlines vary due to holidays, office business hours and operating schedule, media publishing deadlines, etc. Deadlines are published publicly and can also be provided by contacting the Planning Office.

Name: DEAN M. WILLUN	Name:
Street: 701 W (st ST	Street:
City: Madrison State: IN Zip: 47250	City: State: Zip:
Phone (Preferred): (812) 273-3040	Phone (Preferred):
Phone (Alternate):	Phone (Alternate):
Phone (Alternate):	Email:
* If Applicant is not Owner, MUST submit documentation from own	
PROPERTY FOR WHICH PARKING IS PROPOSED	· e
Address and/or Legal Description of Property: $\frac{721}{\omega}$	1ST ST MADISON IN 47250
Zoning Classification: $W - 2$	
Description of Proposed Use: 📗 🖟 ಹಿಡಿಕ್ ಎ 🚨 💲 ನಂಬ ಗಡಿಕೆ	
Submit property site plan detailing all structures and parking areas. Site plans should include dimensions of all parking stalls.	
Number of parking spaces provide: Number of parking spaces provide spaces prov	umber of ADA stalls provided:2
Required Number of Parking Spaces**: 20 Re	equired Number of ADA Stalls**:
**Number of Required spaces and ADA stalls can be obtained from the Planning Office.	

Include any other documents/information which you feel will aid the Board in making its determination.

Certified letters MUST be mailed to adjoining property owners (includes owners of real estate at corners, across streets, alleys or easements as well as others who may share a common boundary) at least ten (10) days prior to the meeting. The Planning Office can assist you in obtaining this information. Proof of the Certified Mail receipts and the corresponding returned green cards shall be given to the Planning Office at least one (1) working day prior to the scheduled meeting. The Board will not review the application unless these are received.

I certify that the information provided in this application is true and accurate to the best of my ability and I understand and agree to the Certified mail stipulations.

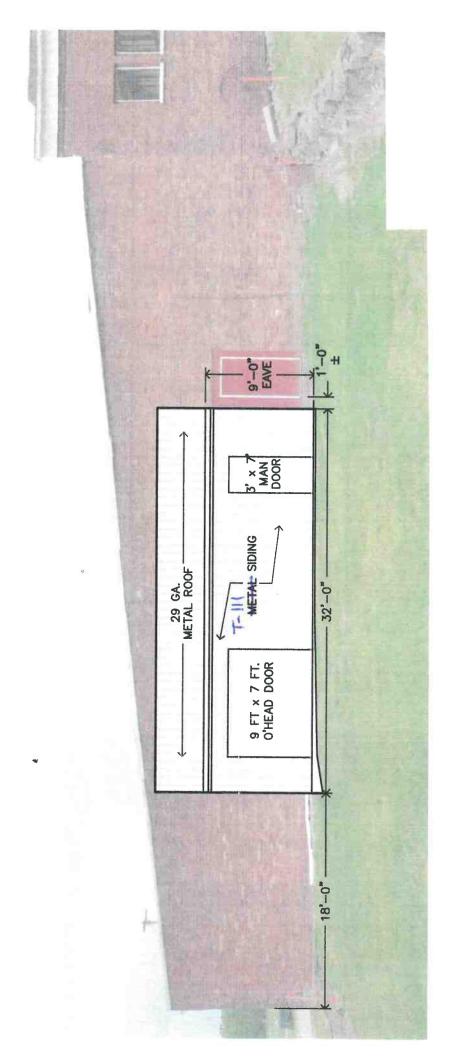
6-9-23	Dear M. Miller
Date	Signature of Applicant

COMPLETED BY PLANNING OFFICE	Meeting Information: Plan Commission
Application Accepted on: 6/15/2023	101 W Main St, Madison, IN 47250 – Council Chambers
Application Accepted by:	Meeting Date: House Jacy 10 Time: 5:30PM
Occumentation Review (Completed by Planning Office)	Staff Notes
Owner Authorization provided (if reg'd)	
Site plan is adequate	
Application is complete	
GIS Information to applicant and attached Certified Mail Receipts received (attach)	
Certified Mail Green Cards received (attach)	





SOUTH ELEVATION SCALE: 1" = 8 FT.



EAST ELEVATION SCALE: 1" = 8 FT.

LER - LUMBER MILL ANTIQUE MALL

DEAN MILLER — LUMBER MII

