

**COMMERCIAL DEVELOPMENT DESIGN STANDARDS APPLICATION**

Planning Department • Phone 608.789.7512 • Fax 608.789.7318

<http://www.cityoflacrosse.org>

Planning@cityoflacrosse.org

Permit No.:

Date:

Parcel No.:

STATUS:

OWNER	Name: GUDDERSEN HEALTH SYSTEM
	Address: 1900 SOUTH AVENUE
	City: LA CROSSE, WI
ARCHITECT CONTRACTOR	Phone: 608 785-6728 Cell: EXT 56728 Fax: _____ E-mail: scraig@gundersenhealth.org
	Name: HSR ASSOCIATES, INC.
	Address: 100 MILWAUKEE ST.
PROJECT	City: LA CROSSE, WI
	Phone: 608 784-1830 Cell: _____ Fax: _____ E-mail: mzettler@hsrassociates.com
	Check One: <input type="checkbox"/> Building <input type="checkbox"/> Addition <input checked="" type="checkbox"/> Alteration/Remodel
PROPERTY	Description of Work: INTERIOR REMODEL w/ WINDOW REPLACEMENT. (DENTAL)
	Pre-application Meeting Date: _____
	Applying for Exception: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Include \$300 Check for Public Notification)
OFFICIAL USE ONLY	Project Address: 201 3RD ST NORTH
	Zoning District: C2-COMMERCIAL Parcel Number: 17-20010-120
	Address: _____ Address same as property owner's address: <input type="checkbox"/>
USE ONLY	City: LA CROSSE State: WI Zip Code: 54601
	Date Received: _____ Review Date: _____
	Exception Check: <input type="checkbox"/> Yes <input type="checkbox"/> No
REQUIRED INFORMATION	Required Information: <input type="checkbox"/> Site Plan <input type="checkbox"/> Architecture Plan <input type="checkbox"/> Landscape Plan <input type="checkbox"/> Building Elevations & Materials
	<input type="checkbox"/> Exterior Light Diagram <input type="checkbox"/> LEED Checklist <input type="checkbox"/> Photos

The applicant agrees that all design aspects and maintenance plans are in accordance with the requirements of Section 15.47 of the Code of Ordinances for the City of La Crosse. Application, the checklist, and seven (7) sets of required information must be submitted to the City Inspection Department prior to review and acceptance.

MARCUS J. ZETTLER
(PRINT) Architect/Engineer Name

STEVE R. CRAIG
(Print) Owner Name

Marcus J. Zettler 12-4-18
Signature (Architect/Engineer) Date

Steven Craig 12-4-18
Signature (Owner) Date