

PUBLIC HEARING: 5/15  
INTRODUCE: 5/11

### Planning Application Form

City of West Allis ■ 7525 West Greenfield Avenue, West Allis, Wisconsin 53214  
414/302-8460 ■ 414/302-8401 (Fax) ■ http://www.ci.west-allis.wi.us

#### Applicant or Agent for Applicant

Name Gina Felten  
Company Tomkens  
Address 8001 W. Greenfield  
City West Allis State WI Zip 53214  
Daytime Phone Number 414-258-9110  
E-mail Address gfeltn@wi.rr.com  
Fax Number \_\_\_\_\_  
Project Name/New Company Name (If applicable) \_\_\_\_\_

#### Agent is Representing (Tenant/Owner)

Name \_\_\_\_\_  
Company \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Daytime Phone Number \_\_\_\_\_  
E-mail Address \_\_\_\_\_  
Fax Number \_\_\_\_\_

#### Application Type and Fee

(Check all that apply)

- Special Use: \$500.00 (Public Hearing Required)
- Level 1 Site, Landscaping, Architectural Plan Review \$100.00 (Project Cost \$0 -2,000)
- Level 2 Site, Landscaping, Architectural Plan Review \$250.00 (Project Cost \$2,001 -5,000)
- Level 3 Site, Landscaping, Architectural Plan Review \$500.00 (Project Cost \$5,001 +)
- Site, Landscaping, Architectural Plan Amendments \$100.00
- Extension of Time: \$250.00
- Signage Plan Review \$100.00
- Signage Plan Appeal: \$100.00
- Request for Rezoning: \$500.00 (Public Hearing required)
- Existing Zoning: \_\_\_\_\_ Proposed Zoning: \_\_\_\_\_
- Request for Ordinance Amendment \$500.00
- Planned Development District \$1500.00(Public Hearing Required)
- Subdivision Plats: \$1700.00
- Certified Survey Map: \$600.00
- Certified Survey Map Re-approval: \$50.00
- Street or Alley Vacation/Dedication: \$500.00
- Transitional Use \$500.00 (Public Hearing Required)

Agent Address will be used for all official correspondence.

#### Property Information

Property Address 8001 W. Greenfield  
Tax Key Number 456-00004 79715-04  
Current Zoning \_\_\_\_\_  
Property Owner Michelle Felten  
Property Owner's Address 705 S. 84 Str.  
Existing Use of Property \_\_\_\_\_  
Total Project Cost Estimate: \$1600.00  
Previous Occupant \_\_\_\_\_

Attached Plans Include: (Application is incomplete without required plans, see handout for requirements)

- Site/Landscaping/Screening Plan
- Floor Plans
- Elevations
- Signage Plan
- Certified Survey Map
- Other \_\_\_\_\_

**In order to be placed on the Plan Commission agenda, the Department of Development MUST receive the following by the last Friday of the month, prior to the month of the Plan Commission meeting.**

(Check boxes next to each listed item):

- Completed Application
- Appropriate Fees
- Project Description
- 6 Sets of folded and stapled plans (24" x 36")
- 1 Electronic copy of plans (PDF format)
- Total Project Cost Estimate

Applicant or Agent Signature Gina Felten Date: 4-3-12  
Subscribed and sworn to me this 4th day of April, 20 12  
Notary Public: Barbara J. Bunker  
My Commission: 10-18-15

Please make checks payable to:  
City Of West Allis

Quer: GNRCDV Type: CC Drawer: 1  
Date: 3/30/12 Receipt no: 36699  
GH DEV SPECIAL U 1 \$500.00  
TOMKEN'S  
GM DEV LVL 1 SIT 1 \$100.00  
TOMKEN'S  
CK CHECK PAYMEN \$600.00  
Total tendered \$600.00  
Total payment \$600.00

Trans date: 4/05/12 Time: 14:52:49

