Planning Application of West Allis Department of Development



Project Name M&S Tives		JUN 2 7 2018	WEST A	LLIS
Applicant or Agent for Applicant		RECEIVED Agent is Representi	ng (Tenant/O	wner)
Name Mohammed Shakar	Name			
Company	Compo	any		K
Address 47465.22nd 5+	Addres	38		
City Milloukee State WI Zip 53221				The state of the s
Daytime Phone Number 6 14 - 717 - 3117		ne Phone Number		
E-mail Address daniel Kirkuk@yahoo.Cor	n E-mail	Address		10 10 10
Fax Number	Fax Nu	mber		8 P.S
Property Information		Application T (Check all t		
Property Address 8323 W LINUID F	He so	ecial Use: (Public Hearing	Poguirod\ \$500	
Tax Key No. 4880376600	E Lev	vel 1: Site, Landscaping, A		Review \$100
Current Zoning <u>C2 - CD M PCC</u> Property Owner A ZIM PRESSIVALA	G □ Lev	(Project Cost \$0-\$1,999) vel 2: Site, Landscaping, A	rchitectural Plan	Review \$250
Property Owner's Address SUI W CID (D) ALC WEST AUS WIFE	C Lev	(Project Cost \$2,000-\$4,999) vel 3: Site, Landscaping, A	rchitectural Plan	Review \$500
Existing Use of Property 310 K O. Se	'	(Project Cost \$5,000+)	1.01	1.41.00
Previous Occupant		e, Landscaping, Architect	ural Plan Amena	ment \$100
		ension of Time \$250		
Total Project Cost Estimate	☐ Sig	nage Plan Appeal \$100		
		quest for Rezoning \$500 (F Existing Zoning: F		
In order to be placed on the Plan Commission	□ Re	quest for Ordinance Ame	ndment \$500	
agenda, the Department of Development <u>MUST</u> receive the following by the last Friday of the month, prior to the month of the Plan Commission meeting.		Planned Development District \$1,500 (Public Hearing Required)		
	□ Suk	odivision Plats \$1,700		
Completed Application	☐ Ce	ertified Survey Map \$725		
Corresponding FeesProject Description	☐ Ce	ertified Survey Map Re-app	proval \$75	
lue One (1) set of plans (24" x 36") - check all that apply	☐ Stre	eet or Alley Vacation/Dec	lication \$500	
■ Site/Landscaping/Screening Plan ■ Floor Plans	☐ Tra	nsitional Use \$500 (Public I	Hearina Reauirea	4)
zoro regional Elevations		mal Zoning Verification \$2		•
☐ Certified Survey Map		That zorming vermeamorr \$2	.00	
☐ Other☐ One (1) electronic copy of plans				
☐ Total Project Cost Estimate	FOR OFF	FICE USE ONLY		
		Plan Commi	ssion 7/25/	18
Please make checks payable to:		Common Council Introduc		118
City of West Allis		mmon Council Public Hed		18
. 23			0/1	
Applicant or Agent Signature		Date 6/27//	R	
		1	1	निध्न जि

Property Owner Signature

Date 62518

City of West Allis | 7525 W. Greenfield Ave. | West Allis, WI 53214 (414) 302-8460 (414) 302-8401 (Fax) | www.westalliswi.gov/planning

C J	5 *500.00 *500.00 *5000.00
81 Receipt SPECIAL USE	1015
Oper: WALSBJB1 Date: 6/26/18 0 GH	MOHAMMED SHAKOR CK CHECK PAYMEN Total tendered Total payment

Trans date: 6/27/18 Time: 14:38:29

\$199.99 \$199.99 \$199.99