

Planning Application



Project Name Jane's Popcorn

Applicant or Agent for Applicant

Name William Duchaine
 Company Jane's Popcorn
 Address 2433 E. Layton Ave
 City Cudahy State WI Zip 53110
 Daytime Phone Number (414) 975-6882
 E-mail Address janespopcorn@gmail.com
 Fax Number (414) 486-1205

Agent is Representing (Tenant/Owner)

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

Property Information

Property Address 2942 S. 108th Street
 Tax Key No. 519-0339-020
 Aldermanic District 5
 Current Zoning C-4
 Property Owner Southtown Plaza LLC
 Property Owner's Address N 9274 Windy Way
Mukwonago, WI. 53149
 Existing Use of Property _____
 Previous Occupant Radio Shack
 Total Project Cost Estimate \$20,000

Application Type and Fee

(Check all that apply)

- Special Use: (Public Hearing Required) \$500
- Level 1: Site, Landscaping, Architectural Plan Review \$100
(Project Cost \$0-\$1,999)
- Level 2: Site, Landscaping, Architectural Plan Review \$250
(Project Cost \$2,000-\$4,999)
- Level 3: Site, Landscaping, Architectural Plan Review \$500
(Project Cost \$5,000+)
- Site, Landscaping, Architectural Plan Amendment \$100
- Extension of Time \$250
- Signage Plan Appeal \$100
- Request for Rezoning \$500 (Public Hearing Required)
Existing Zoning: _____ Proposed Zoning: _____
- Request for Ordinance Amendment \$500
- Planned Development District \$1,500
(Public Hearing Required)
- Subdivision Plats \$1,700
- Certified Survey Map \$600
- Certified Survey Map Re-approval \$50
- Street or Alley Vacation/Dedication \$500
- Transitional Use \$500 (Public Hearing Required)
- Formal Zoning Verification \$200

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.

- Completed Application
- Corresponding Fees
- Project Description
- One (1) set of plans (24" x 36")
 - Site/Landscaping/Screening Plan
 - Floor Plans
 - Elevations
 - Certified Survey Map
 - Other
- One (1) electronic copy of plans
- Total Project Cost Estimate

Please make checks payable to:
 City of West Allis

FOR OFFICE USE ONLY

Plan Commission 6/28/17
 Common Council Introduction 6/20/17
 Common Council Public Hearing 7/11

Applicant or Agent Signature [Signature] Date 6/8/2017
Southtown Plaza LLC

Property Owner Signature [Signature] Date 6/8/2017
Dale Dobroth



Oper: WALSBTRI Type: DC Drawer: 1
Date: 6/09/17 01 Receipt no: 41419
GH DEV SPECIAL USE PERMIT
1.00 \$500.00
SIMPLY DELICIOUS 1 LLC
GP DEV SITE/LAND/ARCH AMEND
1.00 \$100.00
SIMPLY DELICIOUS 1 LLC
CK CHECK PAYMEN 2366 \$600.00
Total tendered \$600.00
Total payment \$600.00

Trans date: 6/14/17 Time: 14:58:15