

Planning Application



Project Name 8410 CLEVELAND - CBRF

Applicant or Agent for Applicant

Name Robert Chandler
 Company MIDWEST COMMERCIAL FUNDING, LLC
 Address 7213 HWY 41
 City CALEDONIA State WI Zip 53108
 Daytime Phone Number 414-731-1151
 E-mail Address rchandler@midwestcommercialfunding.com
 Fax Number _____

Agent is Representing (Tenant/Owner)

Name Brian Fisher
 Company Anderson Ashton Design/Build
 Address 2746 S 166th Street
 City New Berlin State WI Zip 53151
 Daytime Phone Number 262-613-4015
 E-mail Address bfisher@andersonashton.com
 Fax Number _____

Property Information

Property Address 8410 W. Cleveland
 Tax Key No. 4870250002
 Aldermanic District 4th District
 Current Zoning C2
 Property Owner MIDWEST COMMERCIAL FUNDING, LLC
 Property Owner's Address 7213 HWY 41
CALEDONIA WI 53108
 Existing Use of Property Vacant Office
 Previous Occupant _____

 Total Project Cost Estimate \$4,200,000.00

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 \$725
- Certified Survey Map Re-approval \$75
- 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") - check all that apply
 - 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 5/29/19
 Common Council Introduction 5/2/19
 Common Council Public Hearing 6/4/19

Applicant or Agent Signature Robert Chandler Date 4/25/19

Property Owner Signature Steven P. Hribar, Managing Partner Date 4/25/19

Steven Hribar, Managing Partner



Oper: WALSBURY Type: OC Drawer: 1
Date: 5/01/19 01 Receipt no: 29112
GH DEV SPECIAL USE PERMIT \$500.00
1.00
ANDERSON-ASHTON, INC
GO DEV LVL 3 SITE-ARCH PLN R \$500.00
ANDERSON-ASHTON, INC 104977
CK CHECK PAYMEN \$1000.00
Total tendered \$1000.00
Total payment \$1000.00

Trans date: 5/01/19 Time: 12:25:30