

Planning Application



Project Name 1137 S 62nd St.

Applicant or Agent for Applicant

Name Maura Sullivan
 Company _____
 Address 1137 S 62nd St
 City West Allis State WI Zip 53214
 Daytime Phone Number 414-350-3231
 E-mail Address msullivan26@me.com
 Fax Number _____

Agent is Representing (Tenant/Owner)

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

Property Information

Property Address 1137 S 62nd St
 Tax Key No. 439 0216 000
 Aldermanic District 1
 Current Zoning RB-2
 Property Owner Maura Sullivan
 Property Owner's Address 1137 S. 62nd St
 Existing Use of Property Residential
 Previous Occupant _____

Total Project Cost Estimate _____

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 6/26/19
 Common Council Introduction 7/16/19 8/4/19
 Common Council Public Hearing _____

Applicant or Agent Signature [Signature] Date 6/3/2019

Property Owner Signature [Signature] Date 6/3/2019



Ref: 6/07/19 02 Type: UL Drawn: 1
Date: 6/07/19 02 Receipt no: 38141
GL -1 CERTIFIED SURVEY MAP \$695.00
MAURA S. SULLIVAN 1.00
GL -2 CNTY CERT SURVEY MAP \$30.00
MAURA S. SULLIVAN 1.00
CK CHECK PAYMEN 4007 \$725.00
Total tendered \$725.00
Total payment \$725.00
Trans date: 6/07/19 Time: 16:31:45