

Planning Application



Project Name B & M Leasing Parking Lot

Applicant or Agent for Applicant

Name Aaron Nagel
 Company Keller Inc
 Address W204 N11509 Goldendale Rd.
 City Germantown State WI Zip 53022
 Daytime Phone Number 262-894-8810
 E-mail Address anagel@kellerbuilds.com
 Fax Number 262-250-9740

Agent is Representing (Tenant/Owner)

Name Scott Kinkade
 Company B & M Leasing
 Address 3450 S 108th St.
 City Greenfield State WI Zip 53220
 Daytime Phone Number 414-328-3500
 E-mail Address 2scottk@schlossmannauto.com
 Fax Number _____

Property Information

Property Address 3411 S 108th St.
 Tax Key No. 523-9951-002
 Aldermanic District Ward 24
 Current Zoning C-4 Regional Commercial District
 Property Owner Classic Realty Of West Allis LLC
 Property Owner's Address 3190 S Meadow Creek Ct.
New Berlin, WI 53146
 Existing Use of Property Vacant/ Car Sales
 Previous Occupant Restaraunt
 Total Project Cost Estimate 60-70K

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 11-28-18
 Common Council Introduction 11-5-18
 Common Council Public Hearing 12-18-18

Applicant or Agent Signature _____

Date 10-31-18

Property Owner Signature _____

Date _____

