

Planning Application



Project Name The Bakr Sale Kitchen Addition

Applicant or Agent for Applicant

Name Mark S Lutz
 Company Lutz Land Management
 Address 11970 W Morgan Ave
 City West Allis State WI Zip 53228
 Daytime Phone Number 262-617-3276
 E-mail Address mlutz12368@gmail.com

Agent is Representing (Tenant/Owner)

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 Company Lutz Land Management
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 City West Allis State WI Zip 53228
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 E-mail Address mlutz12368@gmail.com

Property Information

Property Address 6923 W Becher St
 Tax Key No. _____
 Aldermanic District 2
 Current Zoning C2
 Property Owner Lutz Land Management
 Property Owner's Address 11970 W Morgan Ave
West Allis WI 53228
 Existing Use of Property Bakery
 Previous Occupant The Bake Sale
 Total Project Cost Estimate \$240,000

Application Type and Fee

(Check all that apply)

- Special Use: (Public Hearing Required) \$525
- Level 1: Site, Landscaping, Architectural Plan Review \$125 (Project Cost \$0-\$1,999)
- Level 2: Site, Landscaping, Architectural Plan Review \$275 (Project Cost \$2,000-\$4,999)
- Level 3: Site, Landscaping, Architectural Plan Review \$525 (Project Cost \$5,000+)
- Site, Landscaping, Architectural Plan Amendment \$125
- Extension of Time \$275
- Master Sign Program Review \$125
- Sign Plan Appeal \$125
- Request for Rezoning \$600 (Public Hearing Required)
Existing Zoning: _____ Proposed Zoning: _____
- Planned Development District \$1,525 (Public Hearing Required)
- Subdivision Plats \$1,700
- Certified Survey Map \$750
- Certified Survey Map Re-approval \$75
- Street or Alley Vacation/Dedication \$525
- Formal Zoning Verification \$225

In order to be placed on the Plan Commission agenda, Planning & Zoning 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
- Set of plans (electronic) - check all that apply.
 - Site/Landscaping/Screening Plan
 - Floor Plans
 - Elevations
 - Certified Survey Map
 - Other

Items shall be emailed to Planning@westalliswi.gov
 Please make checks payable to: City of West Allis

FOR OFFICE USE ONLY

Application Received _____
 Plan Commission 8/25/21
 Publication Date _____
 Common Council Introduction 9/7/21
 Common Council Public Hearing _____

Applicant or Agent Signature [Signature]

Date 8/5/21

Property Owner Signature _____

Date _____

