



Planning Application

Project Name Amerigraphics Group

Applicant or Agent for Applicant

Name Ted Giannattasio
Company Amerigraphics Group
Address 4601 D West Greenfield Ave
City Milwaukee, WI 53214 State _____ Zip _____
Daytime Phone Number 414-643-2123
E-mail Address ted@amerigraphicsgroup.com
Fax Number 414-643-2123

Agent is Representing (Tenant/Owner)

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

Property Information

Property Address 2213 S. 54th St. West Allis, WI 53219
Tax Key No. 474-0509-002
Aldermanic District 1
Current Zoning M1
Property Owner Ted Giannattasio
Property Owner's Address S41 W27350 Timber Tr. Waukesha 53189

Existing Use of Property vacant
Previous Occupant Books are Fun

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 10/28/20
Common Council Introduction _____
Common Council Public Hearing 11/4/20

Applicant or Agent Signature [Signature] Date 9/25/20

Property Owner Signature [Signature] Date 9/25/20



Order: WAL 58181 Type: OC Drawn: 1
Date: 10/05/20 01 Receipt no: 56050
GH DEV SPECIAL USE PERMIT \$500.00
AMERIGRAPHICS GROUP INC 1.00
GH DEV LVL 1 SITE-ARCH PLN R 1.00 \$100.00
AMERIGRAPHICS GROUP INC 1.00
CK CHECK PAYMEN 31689 \$600.00
Total tendered \$800.00
Total payment \$600.00
Trans date: 10/05/20 Time: 12:38:10