

Kais

# Planning Application



Project Name BUTCHER SHOP

### Applicant or Agent for Applicant

Name MARK LOTZ *SHOPE*  
 Company WEST ALLIS CHOC & SAUSAGE  
 Address 6832 W. BECKER ST  
 City WEST ALLIS State WI Zip 53219  
 Daytime Phone Number 262-612-3276  
 E-mail Address MLUTZ 12368 @ GMAIL.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 2079 W. BECKER ST  
 Tax Key No. 4760085 000  
 Aldermanic District 1  
 Current Zoning C 2  
 Property Owner MARK LOTZ  
 Property Owner's Address 1970 W. HOLLAN AVE  
WEST ALLIS, WI 53219  
 Existing Use of Property RETAIL/RESTAURANT  
 Previous Occupant \_\_\_\_\_  
 Total Project Cost Estimate \$ 180,000

### 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 10/24/18  
 Common Council Introduction 10/16/18  
 Common Council Public Hearing 11/16/18

Applicant or Agent Signature [Signature] Date 9/27/18

Property Owner Signature \_\_\_\_\_ Date \_\_\_\_\_



Oper: WALSRJBI Type: OC Drawer: 1  
Date: 9/28/10 01 Receipt no: 64881  
GH DEV SPECIAL USE PERMIT  
1.00 \$500.00  
WEST ALLIS CHEESE & SAUSA  
GO DEV LVL 3 SITE-ARCH PLN R \$500.00  
WEST ALLIS CHEESE & SAUSA  
CK CHECK PAYMEN 33695 \$1000.00  
Total tendered \$1000.00  
Total payment \$1000.00

Trans date: 9/28/10 Time: 14:20:40