







**Matter Summary** 

File Number		Title		Sta	Status			
2009-0175		Special Use Permit			In Committee			
		Special Use Permit to establish the Utopic Therapeutic Massage and Skin Care Spa, to be located within a portion of the existing commercial space at 9422 W. National Ave. (Tax Key No. 479-0674-001)						
		Introduced: 3/17/2009			Controlling Body: Safety & Development Committee			
			Plan Commission					
COMMITTEE	RECOMM	ENDATION		-16				
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ACTION	MOVER	SECONDER	Barczak	AYE	NO	PRESENT	EXCUSED	
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Chair	Vice-Chair			Member				
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## Planning Application Form

City of West Allis ■ 7525 West Greenfield Avenue, West Allis, Wisconsin 53214 414/302-8460 ■ 414/302-8401 (Fax) ■ http://www.ci.west-allis.wi.us Applicant or Agent for Applicant Agent is Representing 255110 () Son Name NATION erangistic Massage & SKIN la@mpany State W) Zip 5322 -327-0800 202.7942 or 414.331.0094 Daytime Phone Number accountants @ mamtacct Fax Number 11/1 Fax Number Project Name/New Company Name (If applicable) Application Type and Fee (Check all that apply) Request for Rezoning: \$500.00 (Public Hearing required) Agent Address will be used for all offical correspondence. Existing Zoning: Proposed Zoning: Property Information Request for Ordinance Amendment \$500.00 W. NATIONA Property Address Special Use: \$500.00 (Public Hearing required) Tax Key Number Transitional Use \$500.00 (Public Hearing Required) Level 1 Site, Landscaping, Architectural Plan Review \$100.00 Property Owner Level 2 Site, Landscaping, Architectural Plan Review \$250.00 Property Owner's Address 94 Level 3 Site, Landscaping, Architectural Plan Review \$500.00 Site, Landscaping, Architectural Plan Amendments \$100.00 Existing Use of Property Extension of Time: \$250.00 Certified Survey Map: \$500.00 + \$30.00 County Treasurer Structure Size Addition Planned Development District \$1500.00(Public Hearing required) Construction Cost Estimate: Hard Subdivision Plats: \$1500.00 + \$100.00 County Treasurer + \$25.00 for Landscaping Cost Estimate reapproval Signage Plan Review \$100.00 Total Project Cost Estimate: Previous Occupant \_\_SCULPTIA Street or Alley Vacation/Dedication: \$500.00 ☐ Signage Plan Appeal: \$100.00 Attach detailed description of proposal. In order to be placed on the Plan Commission agenda, the Department of Development must receive a completed application, appropriate fees, a project description, 6 sets of scaled, folded and stapled plans (24" x 36") and 1 electronic copy (PDF format) of the plans by the last Friday of the month, prior to the month of the Plan Commission meeting. Attached Plans Include: (Application is incomplete without required plans, see handout for requirements) Site Plan ☐Floor Plans ☐ Elevations Signage Plan Legal Description Certified Survey Map ☐ Landscaping/Screening Plan ☐Grading Plan Other Utility System Plan Applicant or Agent Signature Subscribed and sworn to me this day of Please do not write in this box Notary Public: Application Accepted and Authorized by: My Commission: Please make checks payable to: Meeting Date: City Of West Allis

Total Fee:





CITY CLERK/TREASURER'S OFFICE

414/302-8200 or 414/302-8207 (Fax)

www.ci.west-allis.wi.us
Paul M. Ziehler
City Admin. Officer, Clerk/Treasurer
Monica Schultz
Assistant City Clerk
Rosemary West
Treasurer's Office Supervisor

April 13, 2009

Ms. Teresa Wormsbacher and Jessica Olson d/b/a Utopic Therapeutic Massage & Skin Care 9422 W. National Ave. West Allis, WI 53227

Dear Ms. Wormsbacher and Ms. Olson:

On April 7, 2009 the Common Council approved a Resolution relative to determination of Special Use Permit to establish the Utopic Therapeutic Massage and Skin Care Spa, to be located within a portion of the existing commercial space at 9422 W. National Ave.

Please sign and return the enclosed copy of Resolution No. R-2009-0101 to the Clerk's Office within ten (10) days upon receipt of this letter.

Sincerely,

Monica Schultz Assistant City Clerk

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enc.

cc:

John Stibal Ted Atkinson Steve Schaer Barb Burkee

John Horvatin, ECS