Introduce Jun 17 CC

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 (Tenant/Owner)
Name Jerry L. Slinker	Name NA
company Heating and Cooling Showroom	Company
Address 11045 w national Avenue	Address
city westallis State wi zip 53227	City State Zip
Daytime Phone Number <u>242</u> - 781-8433	Daytime Phone Number
E-mail Address In D @ academy of heating and cooling .com	
Fax Number 414 - 763 - 0327	Fax Number
Project Name/New Company Name (If applicable)	Application Type and Fee
	(Check all that apply)
Agent Address will be used for all offical correspondence.	Special Use: \$500.00 (Public Hearing Required)
	Level 1 Site, Landscaping, Architectural Plan Review \$100.00
Property Information	(Project Cost \$0 -2,000)
Property Address 11045 w national Avenue	Level 2 Site, Landscaping, Architectural Plan Review \$250.00 (Project Cost \$2,001 -5,000)
Tax Key Number 520 - 1004 - 000	Level 3 Site, Landscaping, Architectural Plan Review \$500.00
Property Owner Jerry L. Slinker	(Project Cost \$5,001 +)
	☐ Site, Landscaping, Architectural Plan Amendments \$100.00
Property Owner's Address N&O W14229 Campus Court Menomonae falls we S3051	☐ Extension of Time: \$250.00
	☐ Signage Plan Review \$100.00
Existing Use of Property Heating and Cooling	☐ Signage Plan Appeal: \$100.00
Total Project Cost Estimate:	Request for Rezoning: \$500.00 (Public Hearing required)
Previous Occupant Vitamin Life, LC	Existing Zoning: Proposed Zoning:
	Request for Ordinance Amendment \$500.00
	Planned Development District \$1500.00(Public Hearing Required)
	Subdivision Plats: \$1700.00
In order to be placed on the Plan Commission	Certified Survey Map: \$600.00
agenda, the Department of Development MUST	Certified Survey Map Re-approval: \$50.00
receive the following by the last Friday of the month, prior to the month of the Plan Commission meeting.	☐ Street or Alley Vacation/Dedication: \$500.00 ☐ Transitional Use \$500.00 (Public Hearing Required)
	Transitional Use \$500.00 (Public Hearing Required)
(Check boxes next to each listed item): Completed Application	Attached Plans Include: (Application is incomplete without required
d	plans, see handout for requirements)
Appropriate Fees Project Description	☐ Site/Landscaping/Screening Plan
S 6 Sets of folded and stapled plans (24" x 36")	☑ Floor Plans
1 Electronic copy of plans (PDF format)	☐ Elevations
Total Project Cost Estimate	☐ Signage Plan
Total Figest cost Estimate	☐ Certified Survey Map
	☐ Other
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Applicant or Agent Signature	Please make checks payable to: City of West Allis
Subscribed and sworn to me this	S COTARY ME
day of December, 20 1	
Notary Public: Jym a deg Mous	Rlease make checks payable to:
My Commission: 12.14.14	City Of West Allis
my commoduli	WILL OF WISCHILL
	- William.