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City of West Allis

Matter Summary

7525 W. Greenfield Ave.
West Allis, WI 53214

File Number **Title** **Status**

2006-0167 Special Use Permit Public Hearing

Special Use Permit for Wilde Toyota to expand its existing vehicle sales operations at 3225 S. 108 St. onto the property at 3193 S. 108 St. (former Crawford Animal Hospital) and a portion of the property at 3161 S. 108 St. (Gordie Boucher). (Tax Key Nos. 523-9946-009, 523-9949-002, 523-9992-001, and 523-9986-009)

Introduced: 4/4/2006

Controlling Body: Safety & Development Committee

COMMITTEE RECOMMENDATION

File

ACTION DATE:	MOVER	SECONDER		AYE	NO	PRESENT	EXCUSED
<u>6/6/06</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Barczak	<input checked="" type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	Czaplewski				
	<input type="checkbox"/>	<input type="checkbox"/>	Dobrowski				
	<input type="checkbox"/>	<input type="checkbox"/>	Kopplin				
	<input type="checkbox"/>	<input type="checkbox"/>	Lajsic	<input checked="" type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	Narlock				
	<input type="checkbox"/>	<input type="checkbox"/>	Reinke	<input checked="" type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	Sengstock				
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Vitale	<input checked="" type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	Weigel	<input checked="" type="checkbox"/>			
			TOTAL	<u>5</u>	<u>0</u>		

SIGNATURE OF COMMITTEE MEMBER

[Signature] _____ _____
Chair Vice-Chair Member

COMMON COUNCIL ACTION **PLACE ON FILE**

ACTION DATE:	MOVER	SECONDER		AYE	NO	PRESENT	EXCUSED
<u>JUN 06 2006</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Barczak	<input checked="" type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	Czaplewski	<input checked="" type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	Dobrowski	<input checked="" type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	Kopplin				<input checked="" type="checkbox"/>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Lajsic	<input checked="" type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	Narlock	<input checked="" type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	Reinke	<input checked="" type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	Sengstock	<input checked="" type="checkbox"/>			
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Vitale	<input checked="" type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	Weigel	<input checked="" type="checkbox"/>			
			TOTAL	<u>9</u>			<u>1</u>

HTE #2687

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

Name PATRICK J DONAHUE
Company WILDE TOYOTA
Address 3225 S 108th
City WESTALLIS State WI Zip 53227
Daytime Phone Number (262) 513-2772
E-mail Address
Fax Number (262) 542-1653
Project Name/New Company Name (if applicable)

Agent is Representing (Owner/Leasee)

Name WILDE FAMILY LIMITED PARTNERSHIP
Company
Address 1710A HWY 164
City WAUKESHA State WI Zip 53186
Daytime Phone Number (262) 513-2772
E-mail Address
Fax Number (262) 542-1653

Application Type and Fee (Check all that apply)

- Request for Rezoning: \$500.00 (Public Hearing required)
Existing Zoning: Proposed Zoning:
Request for Ordinance Amendment \$500.00
Special Use: \$500.00 (Public Hearing required)
Transitional Use \$500.00 (Public Hearing Required)
Level 1 Site, Landscaping, Architectural Plan Review \$100.00
Level 2 Site, Landscaping, Architectural Plan Review \$250.00
Level 3 Site, Landscaping, Architectural Plan Review \$500.00
Site, Landscaping, Architectural Plan Amendments \$100.00
Certified Survey Map: \$500.00 + \$30.00 County Treasurer
Planned Development District \$1500.00(Public Hearing required)
Subdivision Plats: \$1500.00 + \$100.00 County Treasurer + \$25.00 for reapproval
Signage Plan Review \$100.00
Sign: Permit Fee
Conceptual Project Review
Street or Alley Vacation: \$500.00
Board of Appeals: \$100.00

Check if the above is agent for applicant and complete Agent is Representing Section in upper right of form.

Agent Address will be used for all official correspondence.

Property Information

Property Address 3190 S 108th
Tax Key Number 523-9992-001
Current Zoning COMMERCIAL
Property Owner WILDE
Property Owner's Address
Existing Use of Property COMMERCIAL - AS
CRAWFORD ANIMAL CLINIC
Lot Size
Structure Size Addition
Construction Cost Estimate: Hard Soft Total
Landscaping Cost Estimate
Total Project Cost Estimate:
For Multi-tenant Buildings, Area Occupied
Previous Occupant CRAWFORD ANIMAL CLINIC

Attach legal description for Rezoning, Conditional Use or Planned Development District (PDD).

Attach detailed description of proposal.

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 Utility System Plan Other

Applicant or Agent Signature [Signature]

Date: 3/16/06

Subscribed and sworn to me this 16th day of March 2006

Notary Public: [Signature] My Commission: 9/27/09

Please make checks payable to: City Of West Allis

Please do not write in this box
Application Accepted and Authorized by:
Date:
Meeting Date:
Total Fee: