

# Planning Application



Project Name Vacation of Euclid Ave

### Applicant or Agent for Applicant

Name Richard Pomeroy  
 Company N/A  
 Address 3218 S. 114th Street  
 City WEST ALLIS State WI Zip 53227  
 Daytime Phone Number 414-510-9184  
 E-mail Address rpomeroy@wi.gov  
 Fax Number 262-796-6301

### Agent is Representing (Tenant/Owner)

Name N/A  
 Company \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Daytime Phone Number \_\_\_\_\_  
 E-mail Address \_\_\_\_\_  
 Fax Number \_\_\_\_\_

### Property Information

Property Address 3218 S 114th to the South + EAST  
 Tax Key No. \_\_\_\_\_  
 Aldermanic District 5  
 Current Zoning \_\_\_\_\_  
 Property Owner \_\_\_\_\_  
 Property Owner's Address \_\_\_\_\_  
 Existing Use of Property Vacant  
 Previous Occupant \_\_\_\_\_  
 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 \$600
- Certified Survey Map Re-approval \$50
- 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")
  - 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 \_\_\_\_\_  
 Common Council Introduction \_\_\_\_\_  
 Common Council Public Hearing \_\_\_\_\_

Applicant or Agent Signature \_\_\_\_\_

Date 3/20/17

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

Date \_\_\_\_\_



Oper: WALSRJB1 Type: QC Drawer: 1  
Date: 3/24/17 02 Receipt no: 22170  
GI DEV STREET/ALLEY VACATION  
1.00 \$500.00  
RICK POMEROY  
CK CHECK PAYMEN 1718 \$500.00  
Total tendered \$500.00  
Total payment \$500.00  
Trans date: 3/29/17 Time: 10:50:57

Oper: WALSRJB1 Check: 1718  
Date: 3/24/17 02 Receipt no: 22170  
CHECK PAYMENTS \$500.00  
Amount tendered \$500.00  
FOR DEPOSIT ONLY IN  
TRI-CITY NATL BK  
CITY OF WEST ALLIS #17107-250