Planning Application



Project Name The Lapham	£57, 1900		
Applicant or Agent for Applicant	Agent is Representing (Tenant/Owner)		
Name Myan Oschmann	Name		
Company Bass Bay Brewhouse	Name Company		
Address 5.79 W 15851 Aud-Mar Dr.			
City Muskego State WI Zip 53/50	O City State Zip		
Daytime Phone Number 414-254-0/57	Daytime Phone Number		
E-mail Address Tyun @bassbaybrewhouse.c			
Fax Number 414:422-0904 "	Fax Number		
Property Information	Application Type and Fee (Check all that apply)		
Property Address 1603 5.8/st Street	Special Use: (Public Hearing Required) \$500		
Tax Key No. 452-0327-001/452-0506-000/452-0314 Aldermanic District	Level 1: Site, Landscaping, Architectural Plan Review \$100		
Property Owner Bruce Knehne	Level 2: Site, Landscaping, Architectural Plan Review \$250 (Project Cost \$2,000-\$4,999)		
Property Owner's Address 2637 5.124th St. 1) cw Berlin wit 53227	Level 3: Site, Landscaping, Architectural Plan Review \$500 (Project Cost \$5,000+)		
Previous Occupant Functul Home	☐ Site, Landscaping, Architectural Plan Amendment \$100		
rievious occupanii	Extension of Time \$250		
Total Project Cost Estimate	☐ Signage Plan Appeal \$100		
, , ,	Request for Rezoning \$500 (Public Hearing Required) Existing Zoning: Proposed Zoning:		
In order to be placed on the Plan Commission	☐ Request for Ordinance Amendment \$500		
agenda, the Department of Development <u>MUST</u> receive the following by the last Friday of the month, prior to the month of the Plan Commission meeting.	Planned Development District \$1,500(Public Hearing Required)		
	□ Subdivision Plats \$1,700		
図 Completed Application 図 Corresponding Fees	☐ Certified Survey Map \$725		
☑ Corresponding rees ☑ Project Description	☐ Certified Survey Map Re-approval \$75		
One (1) set of plans (24" x 36") - check all that apply	☐ Certified Survey Map \$725 ☐ Certified Survey Map Re-approval \$75 ☐ Street or Alley Vacation/Dedication \$500		
[전] Site/Landscaping/Screening Plan 図 Floor Plans	☐ Transitional Use \$500 (Public Hearing Required)		
☑ Elevations	☐ Formal Zoning Verification \$200		
∑ Certified Survey Map ☐ Other	1,000		
\square One (1) electronic copy of plans			
Total Project Cost Estimate	FOR OFFICE USE ONLY		
Please make checks payable to: City of West Allis	Plan Commission Common Council Introduction Common Council Public Hearing No vember 5, 2019		
Applicant or Agent Signature	Date 4126/17		

Property Owner Signature



e: DC Drawer: 1 eipt no: 65609 USE PERMIT	1.00 \$500.00 DEV LVL 3 SITE-ARCH PLN R	\$5424 \$1666,66 \$1666,66 \$1666,66	Time: 16:39:03
Uper: WALSBJB1 Type: OC Date: 9/27/19 01 Receipt n GH DEV SPECIAL USE P	MOO INC DEV LYL 3 S	MDO INC CK CHECK PAYMEN Total tendered Total payment	Trans date: 9/27/19

PARTORSHIP TO STANDARD

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