Planning Application



Project Name KWIK TRIP # 1047 Applicant or Agent for Applicant Agent is Representing (Tenant/Owner) Name JEFF 056000 Name Expen Johnson Company NAI/MLG COMMERCIAL Company <u>FWIK TRIP, INC</u> Address 757 BROROWNY SUITE 700 Address 1626 OMEST City <u>LA crosse</u> State <u>WI</u> Zip <u>54682</u> City MLWM FOE State WZ Zip 53202 Daytime Phone Number 608-793-5747 Daytime Phone Number 414-659-9535 E-mail Address is 5900d kwiktrip. com E-mail Address (johnsma Mlg commercial Com Fax Number 608-793-6237 Fax Number Application Type and Fee **Property Information** (Check all that apply) 10901 WEST LAPHIM ST Property Address Sw CANDEDF S. 108 TH ST + W. LAPHAM ST Special Use: (Public Hearing Required) \$500 Tax Key No. PART OF 448 997 9005 + 448 997 9004 ☐ Level 1: Site, Landscaping, Architectural Plan Review \$100 Aldermanic District _____ (Project Cost \$0-\$1,999) Current Zoning M-1 ☐ Level 2: Site, Landscaping, Architectural Plan Review \$250 Property Owner CONST CNR WASH, LLC (Project Cost \$2,000-\$4,999) Property Owner's Address P.O. Box 1012 Level 3: Site, Landscaping, Architectural Plan Review \$500 (Project Cost \$5,000+) Existing Use of Property Bowline MCGY ☐ Site, Landscaping, Architectural Plan Amendment \$100 Previous Occupant ___ ☐ Extension of Time \$250 ☐ Signage Plan Appeal \$100 Total Project Cost Estimate 2,000,000.00 ☐ 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 MUST Planned Development District \$1,500 receive the following by the last Friday of the month, (Public Hearing Required) prior to the month of the Plan Commission meeting. □ Subdivision Plats \$1,700 Certified Survey Map \$725 Corresponding Fees Certified Survey Map Re-approval \$75 Project Description One (1) set of plans (24" x 36") - check all that apply Street or Alley Vacation/Dedication \$500 Site/Landscaping/Screening Plan Transitional Use \$500 (Public Hearing Required) ☑ Floor Plans Formal Zoning Verification \$200 Certified Survey Map Other ■ Total Project Cost Estimate FOR OFFICE USE ONLY Plan Commission Please make checks payable to: Common Council Introduction City of West Allis



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KWIK TRIP, INC GD DEV LVL 3 SITE-ARCH PLN R 1.00 \$500.00

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Applicant or Agent for Applicant	Agent is Representing (Tenant/Owner)
Name JEFF 05600D Company EWIL 772P, INC. Address 1626 000 57	Name Espen Johnson
Company EWIL TRUE INC	Name
rigations Texas (III E 1)	Address 759 00 same -
City LA-clore State WZ Zip 54682	Address 757 Begrowny Sulta 700
Daytime Phone Number 608-793-5747	
E-mail Address josgood @ Kaviktrip. com	1131
Fax Number 608-793-6237	E-mail Address Icjohnsen @ M. lg coumercial . Com Fax Number
Property Information 10901 WEST LAPITAM ST Property Address SWCRNELOF STORTH STAW. LAPIT Tax Key No. PART OF 448 9979 005 + 448 9979 004	Application Type and Fee (Check all that apply)
Tax Key No. PART OF 448 997 9005 + 448 997 9004	Special Use: (Public Hearing Required) \$500
Aldermanic District Current Zoning M-1	Level 1: Site, Landscaping, Architectural Plan Review \$100 (Project Cost \$0-\$1,999)
Property Owner CONST CAR WASH ULC	Level 2: Site, Landscaping, Architectural Plan Review \$250 (Project Cost \$2,000-\$4,999)
Property Owner's Address P.O. Box 1012	Level 3: Site, Landscaping, Architectural Plan Review \$500
Existing Use of Property BOWLIND MEGY	- (Project Cost \$5,000+)
Previous Occupant	- silvi rajidacabina, viciniectoral Light Whetlotteul \$100
	☐ Extension of Time \$250
Total Project Cost Estimate 2,000,000.00	☐ Signage Plan Appeal \$100
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In order to be placed on the Plan Commission	☐ Request for Ordinance Amendment \$500
agenda, the Department of Development MUST	Planned Development District \$1,500
receive the following by the last Friday of the month, prior to the month of the Plan Commission meeting.	(Public Hearing Required)
	☐ Subdivision Plats \$1,700
☐ Completed Application☐ ☐ Corresponding Fees	☐ Certified Survey Map \$725
Project Description	☐ Certified Survey Map Re-approval \$75
One (1) set of plans (24" x 36") - check all that apply St Site/Landscaping/Screening Plan	☐ Street or Alley Vacation/Dedication \$500
Da Floor Plans	☐ Transitional Use \$500 (Public Hearing Required)
🔀 Elevations	☐ Formal Zoning Verification \$200
''' Certified Survey Map 고 Other	La Formal Zolling Vehilledilon \$200
☑ One (1) electronic copy of plans	
🗖 Total Project Cost Estimate	FOR OFFICE USE ONLY
887 x x x x x x x x x x x x x x x x x x	Plan Commission
Please make checks payable to:	Common Council Introduction
City of West Allis	Common Council Public Hearing
Applicant or Agent Signature	Date #1/27/20
THE THE PARTY OF T	Date offering
Property Owner Standaria	Date 07/27/2018

City of West Allis | 7525 W. Greenfield Ave. | West Allis, WI 53214 (414) 302-8460 | (414) 302-8401 (Fax) | www.westolliswi.gov/planning



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