

70.



City of West Allis Matter Summary

7525 W. Greenfield Ave.
West Allis, WI 53214

File Number	Title	Status
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2010-0512 Special Use Permit Introduced

Special Use Permit to establish an educational institution for independent living within the existing facilities of Holy Trinity Lutheran Church located at 11709 W. Lincoln Ave.

Introduced: 9/7/2010

Controlling Body: Safety & Development Committee

Plan Commission

COMMITTEE RECOMMENDATION File

ACTION DATE:	MOVER	SECONDER		AYE	NO	PRESENT	EXCUSED
<u>9/7/10</u>			Barczak				
			Czaplewski				
			Kopplin	✓			
			Lajsic	✓			
		✓	Narlock	✓			
			Reinke	✓		✓	
			Roadt				
			Sengstock				
	✓		Vitale	✓			
			Weigel				
			TOTAL	<u>4</u>		<u>1</u>	

SIGNATURE OF COMMITTEE MEMBER

Chair

Vice-Chair

Member

COMMON COUNCIL ACTION

PLACE ON FILE

ACTION DATE:	MOVER	SECONDER		AYE	NO	PRESENT	EXCUSED
<u>SEP 07 2010</u>			Barczak	✓			
			Czaplewski	✓			
			Kopplin	✓			
	✓		Lajsic	✓			
			Narlock	✓			
			Reinke			✓	
			Roadt	✓			
			Sengstock			✓	
		✓	Vitale	✓			
			Weigel	✓			
			TOTAL	<u>8</u>	<u>-</u>	<u>2</u>	<u>-</u>

**STANDING COMMITTEES OF THE
CITY OF WEST ALLIS COMMON COUNCIL**

ADMINISTRATION & FINANCE

Chair: Kurt E. Kopplin
Vice-Chair: Vincent Vitale
Thomas G. Lajsic
Richard F. Narlock
Rosalie L. Reinke

PUBLIC WORKS

Chair: Gary T. Barczak
Vice-Chair: Martin J. Weigel
Michael J. Czaplewski
Daniel J. Roadt
James W. Sengstock

SAFETY & DEVELOPMENT

Chair: Thomas G. Lajsic
Vice-Chair: Richard F. Narlock
Kurt E. Kopplin
Rosalie L. Reinke
Vincent Vitale

LICENSE & HEALTH

Chair: Michael J. Czaplewski
Vice-Chair: James W. Sengstock
Gary T. Barczak
Daniel J. Roadt
Martin J. Weigel

ADVISORY

Chair: Rosalie L. Reinke
Vice-Chair: Daniel J. Roadt
Kurt E. Kopplin
Richard F. Narlock
Vincent Vitale

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 ROBERT C. JOHNSON
Company _____
Address 15200 LYNWOOD CT.
City NEW BERLIN State WI Zip 53151
Daytime Phone Number (262) 784-6431
E-mail Address REJ1004@SBCGLOBAL.NET
Fax Number _____
Project Name/New Company Name (If applicable) _____

Agent is Representing (Tenant/Owner)

Name HOLY TRINITY LUTHERAN CHURCH
Company _____
Address 11709 W. CLEVELAND AVE
City WEST ALLIS State WI Zip 53227
Daytime Phone Number (414) 321-0700
E-mail Address _____
Fax Number _____

Agent Address will be used for all official correspondence.

Property Information

Property Address 11709 W. CLEVELAND AVE
Tax Key Number ~~38-214542614~~ 521-9999-003
Current Zoning RESIDENTIAL
Property Owner HOLY TRINITY LUTHERAN
Property Owner's Address 11709 W. CLEVELAND AVE
WEST ALLIS, WI 53227
Existing Use of Property CHURCH
Total Project Cost Estimate: _____
Previous Occupant NONE

Application Type and Fee

(Check all that apply)

- Special Use: \$500.00 (Public Hearing Required)
- Level 1 Site, Landscaping, Architectural Plan Review \$100.00 (Project Cost \$0 -2,000)
- Level 2 Site, Landscaping, Architectural Plan Review \$250.00 (Project Cost \$2,001 -5,000)
- Level 3 Site, Landscaping, Architectural Plan Review \$500.00 (Project Cost \$5,001 +)
- Site, Landscaping, Architectural Plan Amendments \$100.00
- Extension of Time: \$250.00
- Signage Plan Review \$100.00
- Signage Plan Appeal: \$100.00
- Request for Rezoning: \$500.00 (Public Hearing required)
- Existing Zoning: _____ Proposed Zoning: _____
- Request for Ordinance Amendment \$500.00
- Planned Development District \$1500.00(Public Hearing Required)
- Subdivision Plats: \$1700.00
- Certified Survey Map: \$600.00
- Certified Survey Map Re-approval: \$50.00
- Street or Alley Vacation/Dedication: \$500.00
- Transitional Use \$500.00 (Public Hearing Required)

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.

(Check boxes next to each listed item):

- Completed Application
- Appropriate Fees
- Project Description
- 6 Sets of folded and stapled plans (24" x 36")
- 1 Electronic copy of plans (PDF format)
- Total Project Cost Estimate

Attached Plans Include: (Application is incomplete without required plans, see handout for requirements)

- Site/Landscaping/Screening Plan
- Floor Plans
- Elevations
- Signage Plan
- Certified Survey Map
- Other _____

Applicant or Agent Signature _____

Robert C. Johnson

Date: 7-28-10

Subscribed and sworn to me this

28 day of July

Notary Public: Heather Lisiak

My Commission: Oct 20, 2013



Please make checks payable to:
City Of West Allis

Oper: GNRCDEV Check: 34494
Date: 8/13/10 01 Recept no: 74050
CHECK PAYMENTS \$500.00
Amount tendered \$500.00

PAY TO THE ORDER OF
TRI-CITY BANK
CITY OF WEST ALLIS #17107-250

