



City of West Allis

Matter Summary

7525 W. Greenfield Ave.
West Allis, WI 53214

File Number	Title	Status
-------------	-------	--------

2007-0155

Special Use Permit

In Committee

Special Use Permit Application for Snap Fitness, a proposed fitness center to be located within the first floor commercial space of The Berkshire, a mixed-use building located at 6405-95 W. Greenfield Ave. (Tax Key No. 454-0635-001 and 454-0636-000)

Introduced: 4/3/2007

Controlling Body: Safety & Development Committee

Plan Commission

COMMITTEE RECOMMENDATION

File

ACTION DATE:	MOVER	SECONDER		AYE	NO	PRESENT	EXCUSED
<u>4.7.07</u>			Barczak				<input checked="" type="checkbox"/>
			Czaplewski				
			Dobrowski				
			Kopplin				
			Lajsic	<input checked="" type="checkbox"/>			
			Narlock				
		<input checked="" type="checkbox"/>	Reinke	<input checked="" type="checkbox"/>			
			Sengstock				
			Vitale	<input checked="" type="checkbox"/>			
	<input checked="" type="checkbox"/>		Weigel	<input checked="" type="checkbox"/>			
TOTAL				<u>4</u>	<u>0</u>	<u> </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>APR 17 2007</u>			Barczak				<input checked="" type="checkbox"/>
			Czaplewski	<input checked="" type="checkbox"/>			
			Dobrowski	<input checked="" type="checkbox"/>			
			Kopplin	<input checked="" type="checkbox"/>			
	<input checked="" type="checkbox"/>		Lajsic	<input checked="" type="checkbox"/>			
			Narlock	<input checked="" type="checkbox"/>			
		<input checked="" type="checkbox"/>	Reinke	<input checked="" type="checkbox"/>			
			Sengstock	<input checked="" type="checkbox"/>			
			Vitale	<input checked="" type="checkbox"/>			
			Weigel	<input checked="" type="checkbox"/>			
TOTAL				<u>9</u>	<u> </u>	<u> </u>	<u>1</u>

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 1 Snap Fitness
Company Five Starz, LLC
Address 369 E. Ravine Baye Rd
City Bg side State WI Zip 53217
Daytime Phone Number 305 9779
E-mail Address jon@oncontact.com
Fax Number 414 351-9807
Project Name/New Company Name (If applicable) _____

Agent Address will be used for all official correspondence.

Property Information

Property Address 6427 N. Greenfield Ave
Tax Key Number 454-0635-000; 454-0636-000
Current Zoning PDD2
Property Owner 80 West Allis LLC
Property Owner's Address 40 General Capital
6938 N. Santa Monica, Fox Point, WI
Existing Use of Property vacant retail
Structure Size ± 3043 sf Addition _____
Construction Cost Estimate: Hard _____ Soft _____ Total \$100,000
Landscaping Cost Estimate n/a
Total Project Cost Estimate: \$100,000
Previous Occupant vacant

Agent is Representing (Owner/Leasee)

Name _____
Company _____
Address _____
City _____ State _____ Zip _____
Daytime Phone Number _____
E-mail Address _____
Fax Number _____

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
☐ Extension of Time: \$250.00
☐ 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
☐ Street or Alley Vacation/Dedication: \$500.00
☐ Signage Plan Appeal: \$100.00

Attach detailed description of proposal.

In order to be placed on the Plan Commission agenda, the Department of Development must receive a completed application, appropriate fees, a project description, **6 sets** of scaled, folded and stapled plans (24" x 36") and **1 electronic copy (PDF format)** of the plans by the first Friday of the month.

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 preliminary space plan

Applicant or Agent Signature _____

Date: 3/12/07

Subscribed and sworn to me this

12 day of March, 20 07

Notary Public: Renée A. Adrian

My Commission: Expires Aug 10, 2008

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: _____