

# 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 Aaron Schwid  
 Company ALCS Landscape Services  
 Address 1556 Martha Washington Dr  
 City Wauwatosa State WI Zip 53213  
 Daytime Phone Number 414 688 7591  
 E-mail Address Aaron.Landscape@AOL.com  
 Fax Number 414 777 1856  
 Project Name/New Company Name (If applicable) \_\_\_\_\_

### Agent is Representing (Tenant/Owner)

Name Steven Schwid  
 Company \_\_\_\_\_  
 Address 1556 Martha Washington Dr  
 City Wauwatosa State WI Zip 53213  
 Daytime Phone Number 414 774 9455  
 E-mail Address SSchwid774@AOL.com  
 Fax Number \_\_\_\_\_

### 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: C-3 Proposed Zoning: M-1
- 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)

Agent Address will be used for all official correspondence.

### Property Information

Property Address 9644 W Schlinger Ave  
 Tax Key Number 416-9984-000  
 Current Zoning Residential C-3  
 Property Owner Aaron Schwid  
 Property Owner's Address 5110 W. 15986 Union Church  
Muskego, WI 53150  
 Existing Use of Property Vacant  
 Total Project Cost Estimate: 150,000 2+3 phases  
 Previous Occupant Duplex

**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)

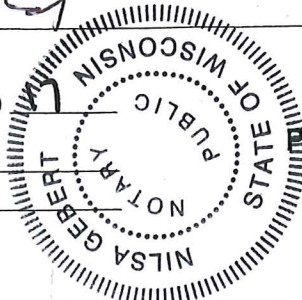
- Site/Landscaping/Screening Plan
- Floor Plans
- Elevations
- Signage Plan
- Certified Survey Map
- Other \_\_\_\_\_

Plan Commission - 9/27/17  
 Common Council - 10/17/17  
 Date: 8/14/17

X Applicant or Agent Signature [Signature]

Subscribed and sworn to me this 14 day of August, 2017

X Notary Public: [Signature]  
 My Commission: 3/12/21



Please make checks payable to:  
**City Of West Allis**

User: WALSH01    Type: DC    Drawn: 1  
Date: 8/29/17    Receipt no: 5034  
BY    DEV REQUEST FOR REZONING    \$500.00  
1.00  
GARDON'S LAWN CARE SERVICE  
OK CHECK PAYMEN    437    \$500.00  
Total tendered    \$500.00  
Total payment    \$500.00

Trans date: 8/24/17    Time: 10:20:23