

Planning Application



Project Name Daycare Center

Applicant or Agent for Applicant

Name Keisha Spencer Jefferson
 Company West Allis Center for Early Education
 Address 11112-10 West National Ave.
 City West Allis State WI Zip 53227
 Daytime Phone Number 414-595-8022
 E-mail Address keishajefferson@outlook.com

Agent is Representing (Tenant/Owner)

Name Andy Ni
 Company New National Plaza
 Address 11112 West National Ave
 City West Allis State WI Zip 53227
 Daytime Phone Number 262-527-0789
 E-mail Address andymingni@gmail.com

Property Information

Property Address 11112-10 West National Ave
 Tax Key No. 590-9999.003
 Aldermanic District 5
 Current Zoning C-4 Zoning
 Property Owner Mei Hua
 Property Owner's Address 1112 West National Ave
 Existing Use of Property Vacant
 Previous Occupant Restaurant
 Total Project Cost Estimate No estimates

Application Type and Fee (Check all that apply)

- Special Use: (Public Hearing Required) \$525
- Level 1: Site, Landscaping, Architectural Plan Review \$125 (Project Cost \$0-\$1,999)
- Level 2: Site, Landscaping, Architectural Plan Review \$275 (Project Cost \$2,000-\$4,999)
- Level 3: Site, Landscaping, Architectural Plan Review \$525 (Project Cost \$5,000+)
- Site, Landscaping, Architectural Plan Amendment \$125
- Extension of Time \$275
- Master Sign Program Review \$125
- Sign Plan Appeal \$125
- Request for Rezoning \$600 (Public Hearing Required)
Existing Zoning: _____ Proposed Zoning: _____
- Planned Development District \$1,525 (Public Hearing Required)
- Subdivision Plats \$1,700
- Certified Survey Map \$750
- Certified Survey Map Re-approval \$75
- Street or Alley Vacation/Dedication \$525
- Formal Zoning Verification \$225

In order to be placed on the Plan Commission agenda, Planning & Zoning MUST receive the following by the last Friday of the month, prior to the month of the Plan Commission meeting.

- Completed Application
- Corresponding Fees
- Project Description
- Set of plans (electronic) - check all that apply
 - Site/Landscaping/Screening Plan
 - Floor Plans
 - Elevations
 - Certified Survey Map
 - Other

Items shall be emailed to Planning@westalliswi.gov
 Please make checks payable to: City of West Allis

FOR OFFICE USE ONLY

Application Received 7-30-21
 Plan Commission 8-25-21
 Publication Date _____
 Common Council Introduction _____
 Common Council Public Hearing 9-7-21

Applicant or Agent Signature Keisha Spencer Jefferson Date 7/30/2021

Property Owner Signature De Memo Date 7/30/2021

