Planning Application



Agent is Representing (Tenant/Owner)

Project Name Element 84 - Building A (South)

Applicant or	Agent for	Applicant	
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Name_Jonathan Ross	Name		
Company Ogden & Company, Inc.	Company		
Address 1665 N. Water Street	Address		
City Milwaukee State WI Zip 53202	City State Zip		
Daytime Phone Number 414-831-0682	Daytime Phone Number		
E-mail Address jonr@ogdenre.com	E-mail Address		
-ax Number 800-908-9715	Fax Number		
Property Information	Application Type and Fee		
Property Address SEE ATTACHED 1468+1482 S.	84 St. (Check all that apply)		
	X Special Use: (Public Hearing Required) \$500 GH		
Tax Key No.	Level 1: Site, Landscaping, Architectural Plan Review \$100		
Aldermanic District	(Project Cost \$0-\$1,999)		
Current Zoning C-3	☐ Level 2: Site, Landscaping, Architectural Plan Review \$250		
Property OwnerProperty Owner's Address	(Project Cost \$2,000- \$4,999)		
	Level 3: Site, Landscaping, Architectural Plan Review \$500 (Project Cost \$5,000+)		
Existing Use of Property Retail, Residential	Site, Landscaping, Architectural Plan Amendment \$100		
Previous Occupant	□ Extension of Time \$250		
Total Project Cost Estimate \$17,765,000	□ Signage Plan Appeal \$100		
(erain reject cost 25nate	 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		
Completed Application	□ Certified Survey Map \$600		
Corresponding Fees	* * * * * * * * * * * * * * * * * * *		
Project Description	 Certified Survey Map Re-approval \$50 		
 One (1) set of plans (24" x 36") Site/Landscaping/Screening Plan 	 Street or Alley Vacation/Dedication \$500 		
Floor Plans	☐ Transitional Use \$500 (Public Hearing Required)		
Elevations	Formal Zoning Verification \$200		
Certified Survey MapOther			
One (1) electronic copy of plans	£		
Total Project Cost Estimate	FOR OFFICE USE ONLY		
	Plan Commission May 25		
Please make checks payable to:	Common Council Introduction May 17		
City of West Allis	Common Council Public Hearing		



Property Owner Signature _____

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DATE:05/02/2016 CK#:10001 TOTAL:\$3,600.00*** BANK:Ogden Midwest Funding LLC(midchk) PAYEE:City of West Allis(taxwesta)

Property	Account	Invoice - Date	Description	Amount
120 120 120 120 120	1194-0001 1194-0001 1194-0001 1194-0001	Element 84 - 05/02/2016 Element 84 - 05/02/2016	Special Use Level 3 Site Landscape Rezoning CSM Street Vac/Dedication	1,000.00 1,000.00 500.00 600.00 500.00
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