

City of West Allis Matter Summary

7525 W. Greenfield Ave. West Allis, WI 53214

File Number	Title	Status			
2006-0614	Special Use Permit	In Committee			
	Special Use Permit for proposed JADS, LLC Southern Cuisine & Entertainment Restaurant, to be located at 6215 W. National Ave. (Tax Key No. 454-0073-001)				
	Introduced: 10/17/2006	Controlling Body: Safety & Development Committee Plan Commission			

COMMITTEE	RECOMM	ENDATION _	Fil	- 4			
	MOVER	SECONDER		AYE	NO	PRESENT	EXCUSED
ACTION	MOVER	SECONDER	Barczak	ALE	NO	TRESENT	EACUSED
DATE:			Czaplewski				
12			Dobrowski				
12 105,06			Kopplin				
(4)			Lajsic	N			
			Narlock				
	0		Reinke Sengstock	/	-	 	
		-	Vitale			+	
			Weigel	/			
			TOTAL	5	8		
Chair	2	Vice-0	Chair		Memb	er .	
COMMON CO	UNCIL AC	TION	PLA	CE ON FI	LE		
COMMON CO			PLA			PRESENT	EXCUSED
COMMON CO	OUNCIL AC	TION SECONDER		AYE	NO	PRESENT	EXCUSED
			Barczak			PRESENT	EXCUSED
ACTION DATE:				AYE		PRESENT	EXCUSED
ACTION DATE:	MOVER		Barczak Czaplewski Dobrowski Kopplin	AYE		PRESENT	EXCUSED
ACTION DATE:	MOVER		Barczak Czaplewski Dobrowski Kopplin Lajsic	AYE		PRESENT	EXCUSED
ACTION DATE:	MOVER		Barczak Czaplewski Dobrowski Kopplin Lajsic Narlock	AYE		PRESENT	EXCUSED
ACTION DATE:	MOVER		Barczak Czaplewski Dobrowski Kopplin Lajsic Narlock Reinke	AYE			EXCUSED
ACTION DATE:	MOVER		Barczak Czaplewski Dobrowski Kopplin Lajsic Narlock Reinke Sengstock	AYE		PRESENT	EXCUSED
ACTION	MOVER		Barczak Czaplewski Dobrowski Kopplin Lajsic Narlock Reinke	AYE			EXCUSED

Planning Application Form

City of West Allis [17525 West Greenfield Avenue, West Allis, Wisconsin 53214

414/302-8460 [] 414/302-8401 (Fax) [] http://www.ci.west-allis.wi.us Agent is Representing (Owner Leasee) **Applicant or Agent for Applicant** FRANK PANHALISON, MA LOANNE CTEACE Address State W/ Zin 530/2 City CENARBURG State W/ Zip 53216 Daytime Phone Number 262 - 387 - 1750 Davtime Phone Number 4/4-243-4483 E-mail Address FRANK @ ARCHDESIGN LTD. COM E-mail Address Fax Number 242-375-8737 Fax Number _ Project Name/New Company Name (If applicable) **Application Type and Fee** GOVITHERN CUISING & ENTERTHINMENT (Check all that apply) Agent Address will be used for all offical correspondence. Request for Rezoning: \$500.00 (Public Hearing required) Existing Zoning: _____ Proposed Zoning: **Property Information** Request for Ordinance Amendment \$500.00 6215 W, NATIONAL AVE. **Property Address** Special Use: \$500.00 (Public Hearing required) 454-0073-001 Tax Kev Number Transitional Use \$500.00 (Public Hearing Required) Current Zoning Level 1 Site, Landscaping, Architectural Plan Review \$100.00 **Property Owner** П Level 2 Site, Landscaping, Architectural Plan Review \$250.00 Property Owner's Address Level 3 Site, Landscaping, Architectural Plan Review \$500.00 Site, Landscaping, Architectural Plan Amendments \$100.00 Existing Use of Property TAVEAN & RESTMIRANT Extension of Time: \$250.00 CURRENTY VACANT Certified Survey Map: \$500.00 + \$30.00 County Treasurer Structure Size 3972 Planned Development District \$1500.00(Public Hearing required) Construction Cost Estimate: Hard 20 Soft 5 Total \$25,000 Subdivision Plats: \$1500.00 + \$100.00 County Treasurer + \$25.00 for Landscaping Cost Estimate reapproval Total Project Cost Estimate: Signage Plan Review \$100.00 Previous Occupant 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 K Floor Plans Elevations ☐ Signage Plan ☐ Certified Survey Map Legal Description X Landscaping/Screening Plan Grading Plap Utpity System Plan Plan Other Applicant or Agent Signature Subscribed and sworn to me this 20 06 Please do not write in this box Application Accepted and Authorized by: My Commission: - Expires

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

Date: Meeting Date: Total Fee:





CITY CLERK/TREASURER OFFICE

Paul M. Ziehler City Administrative Officer Clerk/Treasurer

Rosemary West Treasurer's Office Supervisor Senior Accountant

> Monica Schultz Assistant City Clerk 414/302-8200 414/302-8207 (Fax)

City Hall 7525 West Greenfield Avenue West Allis, Wisconsin 53214

www.ci.west-allis.wi.us

December 13, 2006

Frank Richardson, AIA AD/CM Services, LLC PO Box 674 Cedarburg, WI 53012

Dear Mr. Richardson:

On December 5, 2006 the Common Council approved a Resolution relative to determination of Special Use Permit for proposed JADS, LLC Southern Cuisine & Entertainment Restaurant, to be located at 6215 W. National Ave.

A copy of Resolution No. R-2006-0345 is enclosed.

Monica Schult

Monica Schultz Assistant City Clerk

/amn enc.

cc:

John Stibal Ted Atkinson Steve Schaer Barb Burkee Joanne Grace