

Planning Application



Project Name 65th & Greenfield Cousins Subs

Applicant or Agent for Applicant

Name Robert E. Schmidt III
 Company Boulder Venture
 Address 311 E Chicago Street, Suite 210
 City Milwaukee State WI Zip 53202
 Daytime Phone Number 414-271-5385
 E-mail Address res@boulderventure.com
 Fax Number _____

Agent is Representing (Tenant/Owner)

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

Property Information

Property Address 6512 West Greenfield Avenue
 Tax Key No. 439-0150-002
 Aldermanic District 1
 Current Zoning M-1
 Property Owner Allco Credit Union
 Property Owner's Address PO Box 510810
New Berlin, WI 53151
 Existing Use of Property Office Building
 Previous Occupant Allco Credit Union
 Total Project Cost Estimate \$550,000

Application Type and Fee

(Check all that apply)

- Special Use: (Public Hearing Required) \$500 *
- Level 1: Site, Landscaping, Architectural Plan Review \$100
(Project Cost \$0-\$1,999)
- Level 2: Site, Landscaping, Architectural Plan Review \$250
(Project Cost \$2,000-\$4,999)
- Level 3: Site, Landscaping, Architectural Plan Review \$500
(Project Cost \$5,000+)
- Site, Landscaping, Architectural Plan Amendment \$100
- Extension of Time \$250
- Signage Plan Appeal \$100
- Request for Rezoning \$500 (Public Hearing Required)
Existing Zoning: _____ Proposed Zoning: _____
- Request for Ordinance Amendment \$500
- Planned Development District \$1,500
(Public Hearing Required)
- Subdivision Plats \$1,700
- ~~Certified Survey Map \$300~~
- Certified Survey Map Re-approval \$50
- Street or Alley Vacation/Dedication \$500
- Transitional Use \$500 (Public Hearing Required)
- Formal Zoning Verification \$200

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.

- Completed Application
- Corresponding Fees
- Project Description
- One (1) set of plans (24" x 36")
 - Site/Landscaping/Screening Plan
 - Floor Plans
 - Elevations
 - Certified Survey Map
 - Other
- One (1) electronic copy of plans
- Total Project Cost Estimate

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

FOR OFFICE USE ONLY

Plan Commission 5/24/17
 Common Council Introduction 5/16/17
 Common Council Public Hearing 6/6/17

Applicant or Agent Signature _____ Date _____

Property Owner Signature _____ Date _____



WALSRJBI

Type: OC Drawer: 1

Oper: WALSRJBI Type: OC Drawer: 1
 Date: 5/12/17 02 Receipt no: 31155
 GO DEV LVL 3 SITE-ARCH PLN R
 1.00 \$500.00
 BOULDER VENTURE, LLC
 CK CHECK PAYMEN 4950 \$500.00
 Total tendered \$500.00
 Total payment \$500.00

Trans date: 5/04/17 Time: 13:53:28

Oper: WALSRJBI Check: 4949
 Date: 4/26/17 01 Receipt no: 29922
 CHECK PAYMENTS \$500.00
 Amount tendered \$500.00
 FOR DEPOSIT ONLY IN
 TRI-CITY NATL BK
 CITY OF WEST ALLIS #17107-250

Oper: WALSRJBI Check: 4949
 Date: 4/26/17 01 Receipt no: 29922
 CHECK PAYMENTS \$500.00
 Amount tendered \$500.00
 FOR DEPOSIT ONLY IN
 TRI-CITY NATL BK
 CITY OF WEST ALLIS #17107-250

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