

Planning Application



Project Name Patio (Ext of Premise)

Applicant or Agent for Applicant

Name Bob Nicholson
 Company KA-BORS Bistro
 Address 6807 W Beecher
 City West Allis State WI Zip 53219
 Daytime Phone Number 414-305-3625
 E-mail Address Contact @ KA-BORS.COM
 Fax Number _____

Agent is Representing (Tenant/Owner)

Name Mark Lutz
 Company Lutz Land Management LLC
 Address _____
 City West Allis State WI Zip 53219
 Daytime Phone Number _____
 E-mail Address _____
 Fax Number _____

Property Information

Property Address 6807 W Beecher
 Tax Key No. 476-0154-000
 Aldermanic District _____
 Current Zoning _____
 Property Owner Mark Lutz
 Property Owner's Address _____
 Existing Use of Property Restaurant
 Previous Occupant _____
 Total Project Cost Estimate \$3000

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 \$600
 - 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 hours, operations, schedule
- 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 7/26
 Common Council Introduction 8/1
 Common Council Public Hearing 8/1

Applicant or Agent Signature Bob Nicholson Date 7/1/17

Property Owner Signature Mark Lutz Date 7/1/17

