16



File Number

Title

City of West Allis Matter Summary

Status

7525 W. Greenfield Ave. West Allis, WI 53214

2011-0312		Request Introduced						
		Request by Luna 2 second hand jewe requiring secondh amending section Code to permit the brokers within the Introduced: 5/17/2	lry business, to r and and pawn do 12.41(2), C-2 N e sale of second c C-2 Neighborh	escind the Ordin ealers to locate in eighborhood Co hand article deal ood Commercial	nance, O-2014 In the C-4 Regi In the C-4 Regi In the C-4 Regi In the C-4 Region of the C-4 In	0051, passed Jar onal Commercia rict, of the Revise	nuary 4, 2011 District and ded Municipal rs, and pawn	
COMMITTEE RECOMMENDATION DENY 45-LE								
ACTION	MOVER	SECONDER	Barczak	AYE	NO	PRESENT	EXCUSED	
DATE:			Czaplewski					
, ,			Kopplin	/				
5/17/11			Lajsic	/				
		/	Narlock Reinke	V				
			Roadt	V				
			Sengstock					
			Vitale	/				
	**		Weigel					
			TOTAL	_5	0			
SIGNATURE	OF COMMIT	THEE MEMBE	R					
Chair		Vice-Chair			Memb	Member		
COMMON COUNCIL ACTION Deny + pof								
	MOVER	SECONDER		AYE	NO	PRESENT	EXCUSED	
ACTION			Barczak	V		N. C.		
DATE:			Czaplewski	V				
5-17-11			Kopplin Lajsic	1				
			Narlock	1		1		
			Reinke	V.				
			Roadt	1/				
			Sengstock	V				
			Vitale Weigel	1/				
		-	, reigei	11				
			TOTAL	10			-	

Planning Application Form

City of West Allis ■ 7525 West Greenfield Avenue, West Allis, Wisconsin 53214 414/302-8460 ■ 414/302-8401 (Fax) ■ http://www.ci.west-allis.wi.us

E 1, 5 ,					
Applicant or Agent Applicant	Agent is Representing (Tenant/Owner)				
Name Luna Jewelry & Repair, LLC.	Name				
Company 5Ary E	Company				
Address 5835 W. National Ave.	Address				
City West Ailis State Wi Zip 53214	City State Zip				
Daytime Phone Number 414 - 774 - 4653	Daytime Phone Number				
E-mail Address	E-mail Address				
Fax Number 414 - 774 - 4664	Fax Number				
Project Name/New Company Name (If applicable)	Application Type and Fee (Check all that apply)				
Agent Address will be used for all offical correspondence.	☐ Special Use: \$500.00 (Public Hearing Required)				
Property Information	Level 1 Site, Landscaping, Architectural Plan Review \$100.00 (Project Cost \$0 -2,000)				
Property Address 5835 W. National Ave. Tax Key Number	Level 2 Site, Landscaping, Architectural Plan Review \$250.00 (Project Cost \$2,001 -5,000)				
	Level 3 Site, Landscaping, Architectural Plan Review \$500.00 (Project Cost \$5,001 +)				
Property Owner Simon Says Investments	-				
	☐ Site, Landscaping, Architectural Plan Amendments \$100.00 ☐ Extension of Time: \$250.00				
Property Owner's Address	☐ Signage Plan Review \$100.00				
Eviating Use of Property	☐ Signage Plan Appeal: \$100.00				
Existing Use of Property	Request for Rezoning: \$500.00 (Public Hearing required)				
Total Project Cost Estimate: Previous Occupant	Existing Zoning: Proposed Zoning:				
Previous Occupant	Request for Ordinance Amendment \$500.00				
	Planned Development District \$1500.00(Public Hearing Required)				
*	Subdivision Plats: \$1700.00				
In order to be placed on the Plan Commission					
agenda, the Department of Development MUST	☐ Certified Survey Map Re-approval: \$50.00				
receive the following by the last Friday of the month, prior to the month of the Plan Commission meeting.	☐ Street or Alley Vacation/Dedication: \$500.00 ☐ Transitional Use \$500.00 (Public Hearing Required)				
	Transitional use \$500.00 (Public Realing Required)				
(Check boxes next to each listed item): Completed Application	Attached Plans Include: (Application is incomplete without required				
☐ Appropriate Fees	plans, see handout for requirements)				
Project Description	☐ Site/Landscaping/Screening Plan				
G Sets of folded and stapled plans (24" x 36")	☐ Floor Plans				
1 Electronic copy of plans (PDF format)	☐ Elevations				
Total Project Cost Estimate	☐ Signage Plan				
La Total Project Cost Estimate	☐ Certified Survey Map				
	Other				
Applicant or Agent Signature	Date: 4-30-11				
Subscribed and sworn to me this					
, 20	ar and a second an				
	Please make checks payable to:				

My Commission: _

City Of West Allis

CITY OF WEST ALLIS
REPRINT
*** CUSTOMER RECEIPT ***
Cper: GNRCDEV Type: DC Drawer: 1
Date: 4/22/11 02 Receipt no: 45021

Description Quantity Amount BV DEV ORDINACE ADMENDMENT 1.00 \$500.00 Trans number: 1095922

Trans number: G/L account number: 10000004420106 LUNA JEWELRY

Tender detail
CK CHECK PAY 1261 \$500.00
Total tendered \$500.00
Total payment \$500.00

Trans date: 5/02/11 Time: 16:30:05

*** THANK YOU FOR YOUR PAYMENT ***

Mis mo

(1/6