

Planning Application



Project Name WTT THREFT, INC. "THREE IN ONE THREFT STORE"
(LEGAL ENTITY)

Applicant or Agent for Applicant

Agent is Representing (Tenant/Owner)

Name LUTHERAN HIGH SCHOOL ASSOCIATION
 Company _____
 Address 10427 W LINCOLN AVE SUITE 1300
 City WEST ALLIS State WI Zip 53227
 Daytime Phone Number 414 421 9100
 E-mail Address coldenburg@lhsagm.org
 Fax Number _____

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

Property Information

Application Type and Fee (Check all that apply)

Property Address 3117-3125 S. 108th STREET
 Tax Key No. ~~5239997-000~~ 5239997-000
 Aldermanic District 5
 Current Zoning C4 MAZEL Company
 Property Owner FRESCH, SHAY AND TAYLOR, INC.
 Property Owner's Address 735 N. WATER ST Rm 100
MILWAUKEE WI 53202
 Existing Use of Property VACANT
 Previous Occupant GAME MASTERS
 Total Project Cost Estimate \$10,000⁰⁰

- 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
- One (1) set of plans (24" x 36") - check all that apply
 - 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 9-27-17
 Common Council Introduction 9-19-17
 Common Council Public Hearing 10-3-17

Applicant or Agent Signature *Maureen B...* Date 8-30-17

Property Owner Signature _____ Date _____



