## **Planning Application Form**



Project Name AGGIE'S BAKERY Applicant or Agent for Applicant Agent is Representing (Tenant/Owner) Name ADAM PURCEUL Name Company AGGIE'S BAKERY Company \_\_\_\_\_ Address (800 E. HOWARD AVE. Address \_\_\_\_\_ City Milwankee State W/ Zip 53207 \_\_\_\_\_State \_\_\_\_\_Zip \_\_\_\_ City\_\_\_ Daytime Phone Number 414 · 702 · 2602 Daytime Phone Number \_\_\_\_\_ E-mail Address <u>awfurcelle</u> aol.com E-mail Address Fax Number Fax Number \_\_\_ **Property Information** Application Type and Fee (Check all that apply) Property Address 7326-28 W. Greenfield West Allis Tax Key No. 440-0380-000 Special Use: \$500 (Public Hearing Required) Aldermanic District 2nd District Level 1: Site, Landscaping, Architectural Plan Review \$100 Current Zoning C-/ (Project Cost \$0-\$1,999) Property Owner ANCHOR BANK Level 2: Site, Landscaping, Architectural Plan Review \$250 Property Owner's Address (Project Cost \$2,000-\$4,999) Level 3: Site, Landscaping, Architectural Plan Review \$500 (Project Cost \$5,000+) Existing Use of Property Mercantile Site, Landscaping, Architectural Plan Amendment \$100. Previous Occupant Graphic Impressions Extension of Time \$250 Total Project Cost Estimate \_\_\_\_\_ Signage Plan Appeal \$100 Request for Rezoning \$500 (Public Hearing Required) Existing Zoning: \_\_\_\_\_ Proposed Zoning: \_\_\_ In order to be placed on the Plan Commission Request for Ordinance Amendment \$500 agenda, the Department of Development MUST receive the following by the last Friday of the month, Planned Development District \$1,500 prior to the month of the Plan Commission meeting. (Public Hearing Required) Subdivision Plats \$1,700 Completed Application Certified Survey Map \$600 Corresponding Fees Project Description Certified Survey Map Re-approval \$50 One (1) set of plans (24" x 36") Street or Alley Vacation/Dedication \$500 → Site/Landscaping/Screening Plan Floor Plans Transitional Use \$500 (Public Hearing Required) Elevations Formal Zoning Verification \$200 Gertified Survey Map П Other One (1) electronic copy of plans Total Project Cost Estimate FOR OFFICE USE ONLY Plan Commission Please make checks payable to: Common Council Introduction City of West Allis Common Council Public Hearing Applicant or Agent Signature Date 6.9.2014