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City of West Allis

Matter Summary

7525 W. Greenfield Ave.
West Allis, WI 53214

File Number	Title	Status
2004-0744	Special Use Permit	In Committee
Special use application to re-establish a mixed use (commercial - residential) within the existing building at 8121-25 W. National Ave. (tax key number 452-0601-000).		
Introduced: 12/21/2004		Controlling Body: Safety & Development Committee PLAN COMMISSION

COMMITTEE RECOMMENDATION

ACTION DATE:	MOVER	SECONDER		AYE	NO	PRESENT	EXCUSED
<u>1/4/05</u>			Barczak	✓			
			Czaplewski				
			Dobrowski				
			Kopplin				
			Lajsic	✓			
			Narlock				
			Reinke	✓			
			Sengstock				
	✓		Vitale	✓			
		✓	Weigel	✓			
TOTAL				<u>5</u>	<u>0</u>		

SIGNATURE OF COMMITTEE MEMBER

Chair

Vice-Chair

Member

COMMON COUNCIL ACTION

PLACE ON FILE

ACTION DATE:	MOVER	SECONDER		AYE	NO	PRESENT	EXCUSED
<u>JAN 04 2005</u>			Barczak	✓			
			Czaplewski	✓			
			Dobrowski	✓			
			Kopplin	✓			
	✓		Lajsic	✓			
			Narlock	✓			
		✓	Reinke	✓			
			Sengstock	✓			
			Vitale	✓			
			Weigel	✓			
TOTAL				<u>10</u>	<u>—</u>		

STANDING COMMITTEES OF THE CITY OF WEST ALLIS COMMON COUNCIL 2004

ADMINISTRATION & FINANCE

Chair: Michael J. Czaplewski
Vice-Chair: Martin J. Weigel
Gary T. Barczak
Thomas G. Lajsic
Rosalie L. Reinke

PUBLIC WORKS

Chair: Richard F. Narlock
Vice-Chair: Linda A. Dobrowski
Kurt E. Kopplin
Vincent Vitale
James W. Sengstock

SAFETY & DEVELOPMENT

Chair: Thomas G. Lajsic
Vice-Chair: Vincent Vitale
Gary T. Barczak
Martin J. Weigel
Rosalie L. Reinke

LICENSE & HEALTH

Chair: Kurt E. Kopplin
Vice-Chair: James W. Sengstock
Linda A. Dobrowski
Richard F. Narlock
Michael J. Czaplewski

ADVISORY

Chair: Rosalie L. Reinke
Vice-Chair: Gary T. Barczak
Linda A. Dobrowski
Vincent Vitale
Martin J. Weigel

Planning Application Form

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

Applicant or Agent for Applicant

Name Kevin McFadden
Company _____
Address 1212 S. 64th
City West Allis State WI Zip 53214
Daytime Phone Number 414 899-3238
E-mail Address _____
Fax Number _____
Project Name/New Company Name (If applicable) _____

☐ Check if the above is agent for applicant and complete
Agent is Representing Section in upper right of form.

Agent Address will be used for all official correspondence.

Property Information

Property Address 8123-A. W National Ave
Tax Key Number _____
Current Zoning _____
Property Owner Mel Adams
Property Owner's Address 8113 W National Ave
Existing Use of Property Mixed Use
Lot Size _____
Structure Size _____ Addition _____
Construction Cost Estimate: Hard _____ Soft _____ Total _____
Landscaping Cost Estimate _____
Total Project Cost Estimate: 25K
For Multi-tenant Buildings, Area Occupied _____
Previous Occupant _____

Agent is Representing (Owner/Leasee)

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

Application Type and Fee

(Check all that apply)

- ☐ Request for Rezoning: \$500.00 (Public Hearing required)
Existing Zoning: _____ Proposed Zoning: _____
- ☐ Request for Ordinance Amendment \$500.00
- ☒ Special Use: \$500.00 (Public Hearing required)
- ☐ Transitional Use \$500.00 (Public Hearing Required)
- ☐ Level 1 Site, Landscaping, Architectural Plan Review \$100.00
- ☐ Level 2 Site, Landscaping, Architectural Plan Review \$250.00
- ☐ Level 3 Site, Landscaping, Architectural Plan Review \$500.00
- ☐ Site, Landscaping, Architectural Plan Amendments \$100.00
- ☐ Certified Survey Map: \$500.00 + \$30.00 County Treasurer
- ☐ Planned Development District \$1500.00 (Public Hearing required)
- ☐ Subdivision Plats: \$1500.00 + \$100.00 County Treasurer + \$25.00 for reapproval
- ☐ Signage Plan Review \$100.00
- ☐ Sign: Permit Fee _____
- ☐ Conceptual Project Review _____
- ☐ Street or Alley Vacation: \$500.00
- ☐ Board of Appeals: \$100.00

Attach legal description for Rezoning, Conditional Use or Planned Development District (PDD)

Attach detailed description of proposal.

Attached Plans Include: (Application is incomplete without required plans, see handout for requirements)

- ☒ Site Plan ☒ Floor Plans ☒ Elevations ☐ Signage Plan ☐ Legal Description ☐ Certified Survey Map
☐ Landscaping/Screening Plan ☐ Grading Plan ☐ Utility System Plan ☐ Other _____

Applicant or Agent Signature _____

Date: 12/12/04

Subscribed and sworn to me this

13 day of December, 20 04

Notary Public: Jane Schelling

My Commission: 9-7-08

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

Please do not write in this box

Application Accepted and Authorized by: _____

Date: _____

Meeting Date: _____

Total Fee: _____

CC. Shawn or Steve Schaefer

Oper: JSCHILLING Type: OC Drawer: 1
Date: 12/13/04 01 Receipt no: 117719
GH CLK SPECIAL USE 1 \$500.00
KEVIN MCFADDAN
CK CHECK PA 125 \$500.00
Total tendered \$500.00
Total payment \$500.00

Trans date: 12/13/04 Time: 13:47:02

45CWR76

Froed

Dave Roun
A



CITY OF WEST ALLIS

WISCONSIN



City Clerk/Treasurer Office

Paul M. Ziehler
*City Administrative Officer
Clerk/Treasurer*

Dorothy E. Steinke
Deputy City Treasurer

Monica Schultz
Assistant City Clerk

January 11, 2005

Kevin McFaddan
1212 S. 64 St.
West Allis, WI 53214

Dear Mr. McFaddan:

On January 4, 2005 the Common Council approved a Resolution relative to determination of a Special Use Application to re-establish a mixed use (commercial - residential) within the existing building at 8121-25 W. National Ave. (Tax Key Number 452-0601-000).

A copy of Resolution No. R-2005-0005 is enclosed.

Sincerely,

A handwritten signature in cursive script that reads 'Monica Schultz'.

Monica Schultz
Assistant City Clerk

/hc
enc.

cc: John Stibal
Ted Atkinson
Steve Schaer
Barb Burkee