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

Applicant or Agent for Applicant	Agent is Representing (Tenant/Owner)
Name_Tom ReymoldS	Name
Company Endeavor Press	Company
Address 9430 W. Schlinger Ave	Address
City West Allis State WI Zin 53214	City State Zip
Daytime Phone Number 414 · 258 - 9946	Daytime Phone Number
E-mail Address endeavor presse sbcglobal net	E-mail Address
Fax Number 414, 258, 9525	Fax Number
Project Name/New Company Name (If applicable)	
Troject Hamerican Company Hame (in 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 9500 W. Schlinger Ave	☐ Level 2 Site, Landscaping, Architectural Plan Review \$250.00
Tax Key Number	(Project Cost \$2,001 -5,000)
Current Zoning C-3	Level 3 Site, Landscaping, Architectural Plan Review \$500.00 (Project Cost \$5,001 +)
Property Owner Tom Reymolds	☐ Site, Landscaping, Architectural Plan Amendments \$100.00
Property Owner's Address 9430 W. Schlinger Ave	Extension of Time: \$250.00
	☐ Signage Plan Review \$100.00
Existing Use of Property	☐ Signage Plan Appeal: \$100.00
Total Project Cost Estimate:	Request for Rezoning: \$500.00 (Public Hearing required)
Previous Occupant Perfection Upholsten/	Existing Zoning: Proposed Zoning:
	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	☐ Certified Survey Map: \$600.00
agenda, the Department of Development MUST	☐ Certified Survey Map Re-approval: \$50.00
receive the following by the last Friday of the month,	☐ Street or Alley Vacation/Dedication: \$500.00
prior to the month of the Plan Commission meeting.	☐ Transitional Use \$500.00 (Public Hearing Required)
(Check boxes next to each listed item):	Attached Diana Include: (Antiestics is incomplete without any in-
Z Completed Application	Attached Plans Include: (Application is incomplete without required plans, see handout for requirements)
Appropriate Fees	☐ Site/Landscaping/Screening Plan
Project Description	☐ Floor Plans
6 Sets of folded and stapled plans (24" x 36")	☐ Elevations
1 Electronic copy of plans (PDF format)	☐ Signage Plan
☐ Total Project Cost Estimate	☐ Certified Survey Map
	Other
Applicant or Agent Signature Jon Pour	212/2012
Applicant or Agent Signature	Date: 3/13/2013
Subscribed and sworn to me this	,
, 20	
Notes, Public	Please make checks payable to:
Notary Public:	City Of West Allis

Frans date: 3/14/13 Time: 14:44:38