

# Planning Application



Project Name Patio (Ext of Premise)

### Applicant or Agent for Applicant

Name Bob Nicholson  
 Company KA-BORS Bistro  
 Address 6807 W Beecher  
 City West Allis State WI Zip 53219  
 Daytime Phone Number 414-305-3625  
 E-mail Address Contact @ KA-BORS.com  
 Fax Number \_\_\_\_\_

### Agent is Representing (Tenant/Owner)

Name Mark Lutz  
 Company Lutz Land Management LLC  
 Address \_\_\_\_\_  
 City West Allis State WI Zip 53219  
 Daytime Phone Number \_\_\_\_\_  
 E-mail Address \_\_\_\_\_  
 Fax Number \_\_\_\_\_

### Property Information

Property Address 6807 W Beecher  
 Tax Key No. 476-0154-000  
 Aldermanic District \_\_\_\_\_  
 Current Zoning \_\_\_\_\_  
 Property Owner Mark Lutz  
 Property Owner's Address \_\_\_\_\_  
 Existing Use of Property Restaurant  
 Previous Occupant \_\_\_\_\_  
 Total Project Cost Estimate \$3000

### Application Type and Fee

(Check all that apply)

- 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 hours, operations, schedule
- One (1) set of plans (24" x 36")
  - 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 7/26  
 Common Council Introduction 8/1  
 Common Council Public Hearing 8/1

Applicant or Agent Signature Bob Nicholson Date 7/1/17

Property Owner Signature Mark Lutz Date 7/1/17

