

# Planning Application



Project Name Auto Repair - Services

### Applicant or Agent for Applicant

### Agent is Representing (Tenant/Owner)

Name Jose Vidrios  
 Company Jose Vidrios DBA JV Auto Repairs  
 Address 5606 W Burham St  
 City West Allis State WI Zip 53219  
 Daytime Phone Number 414-881-4277  
 E-mail Address \_\_\_\_\_  
 Fax Number \_\_\_\_\_

Name \_\_\_\_\_  
 Company \_\_\_\_\_  
 Address None / Same  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Daytime Phone Number \_\_\_\_\_  
 E-mail Address \_\_\_\_\_  
 Fax Number \_\_\_\_\_

### Property Information

Property Address 5606 W Burham St  
 Tax Key No. 455-0033-000  
 Aldermanic District 1  
 Current Zoning C-2  
 Property Owner Jose Vidrios  
 Property Owner's Address 3573 S 46th St  
Greenfield WI 53220  
 Existing Use of Property Parking  
 Previous Occupant I don't know  
 Total Project Cost Estimate \_\_\_\_\_

### 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 \$725
- Certified Survey Map Re-approval \$75
- 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 3-27-19  
 Common Council Introduction 3-19-19  
 Common Council Public Hearing 4-1-19

Applicant or Agent Signature [Signature] Date 3-5-19

Property Owner Signature [Signature] Date 3-5-19



RECEIPT NO: 14422  
 DEV SPECIAL USE PERMIT  
 \$500.00  
 1.00  
 JOSE VIDRIOS  
 DEV LVL 1 SITE-ARCH PLN R  
 \$100.00  
 JOSE VIDRIOS  
 CA CASH PAYMENT  
 \$600.00  
 Total tendered \$600.00  
 Total payment \$600.00

Trans date: 3/05/19 Time: 13:25:51

Commission member  
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 of Government  
 in the Plan Commission

2019  
 3/5/19