

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

Introduce 1-23-12 PC

Applicant or Agent for Applicant

Name MELISSA KLOCKTLEN
Company FAMILY VIDEO
Address 510 SHREVE LN
City NEENAH State WI Zip 54956
Daytime Phone Number 920-284-0553
E-mail Address melissa.klocktlen@familyvideo.com
Fax Number (309) 670-1313
Project Name/New Company Name (If applicable) MARCOS PIZZA / HODGKINS FOODS
Agent Address will be used for all official correspondence.

Property Information

Property Address 1723 S. 76TH STREET
Tax Key Number 4530433001 / 4530450000
Current Zoning _____
Property Owner FAMILY VIDEO
Property Owner's Address 1022 EAST ADAMS, SPRINGFIELD, IL, 250 LEMAITRE, GLENVIEW IL 60008
Existing Use of Property TENANT / LEASE SPOT
Total Project Cost Estimate: 110,000.00
Previous Occupant NONE

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.

(Check boxes next to each listed item):

- ☐ Completed Application
- ☐ Appropriate Fees
- ☐ Project Description
- ☐ 6 Sets of folded and stapled plans (24" x 36")
- ☐ 1 Electronic copy of plans (PDF format)
- ☐ Total Project Cost Estimate

Agent is Representing (Tenant/Owner)

Name KEITH HODGKINS
Company FAMILY VIDEO / KAH3 PROPERTY
Address 1022 E. Adams Street
City Springfield State IL Zip 62703
Daytime Phone Number 1-847-904-9000
E-mail Address _____
Fax Number 1-217-544-8416

Application Type and Fee

(Check all that apply)

- ☒ Special Use: \$500.00 (Public Hearing Required)
- ☐ Level 1 Site, Landscaping, Architectural Plan Review \$100.00 (Project Cost \$0 -2,000)
- ☐ Level 2 Site, Landscaping, Architectural Plan Review \$250.00 (Project Cost \$2,001 -5,000)
- ☐ Level 3 Site, Landscaping, Architectural Plan Review \$500.00 (Project Cost \$5,001 +)
- ☒ Site, Landscaping, Architectural Plan Amendments \$100.00
- ☐ Extension of Time: \$250.00
- ☒ Signage Plan Review \$100.00
- ☐ Signage Plan Appeal: \$100.00
- ☐ Request for Rezoning: \$500.00 (Public Hearing required)
- Existing Zoning: _____ Proposed Zoning: _____
- ☐ Request for Ordinance Amendment \$500.00
- ☐ Planned Development District \$1500.00(Public Hearing Required)
- ☐ Subdivision Plats: \$1700.00
- ☐ Certified Survey Map: \$600.00
- ☐ Certified Survey Map Re-approval: \$50.00
- ☐ Street or Alley Vacation/Dedication: \$500.00
- ☐ Transitional Use \$500.00 (Public Hearing Required)

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

- ☒ Site/Landscaping/Screening Plan
- ☒ Floor Plans
- ☐ Elevations
- ☒ Signage Plan
- ☐ Certified Survey Map
- ☐ Other _____

Applicant or Agent Signature

Melissa Klocktlen

Date:

Nov. 28, 12

Subscribed and sworn to me this

_____ day of _____, 20____

Notary Public: _____

My Commission: _____

Please make checks payable to:
City Of West Allis

Door: BNRCDDEV
Type: DC Drawer: 1
Date: 11/12/12 01 Receipt no: 106646
BH DEV SPECIAL U 1 \$500.00
KLOCKZIEH/FAMILY VIDEO
BM DEV LVL 1 SIT 1 \$100.00
KLOCKZIEH/FAMILY VIDEO
GR DEV SIGNAGE P 1 \$100.00
KLOCKZIEH/FAMILY VIDEO
CK CHECK PA 1850 \$700.00
Total tendered \$700.00
Total payment \$700.00
Trans date: 11/28/12 Time: 15:57:55

21-8-12