

File Number

Title

City of West Allis Matter Summary

Status

7525 W. Greenfield Ave. West Allis, WI 53214

2010-0616		Special Use Permit Introduced						
		Special Use Perm Becher St.	Special Use Permit for proposed commercial truck sales and repair to take place at 11139 W. Becher St.					
		Introduced: 10/19/2010		Co	Controlling Body: Safety & Development Committee			
						Plan Commis	ssion	
COMMITTEE	RECOMM	ENDATION _		FIL	9			
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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

Agent is Representing (Tenant/Owner)

City Of West Allis

Applicant or Age	ent for Applicant
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My Commission: _

Michelle Herriges Name August Schmidt Company, Inc. Company Company 11020 W. Mitchell St. Address Address West Allis WI Zip 53214 State City_ _____ State ____ Zip ___ City (414)257-3200 Daytime Phone Number _ Daytime Phone Number ____ mherriges@augustschmidt.com E-mail Address E-mail Address (414)257-1380 Fax Number Fax Number __ Project Name/New Company Name (If applicable) Application Type and Fee N/A (Check all that apply) Agent Address will be used for all offical correspondence. Special Use: \$500.00 (Public Hearing Required) Level 1 Site, Landscaping, Architectural Plan Review \$100.00 (Project Cost \$0 -2,000) Property Information 11139 West Becher, West Allis 53227 Level 2 Site, Landscaping, Architectural Plan Review \$250.00 (Project Cost \$2,001-5,000) Property Address 481-9992-015 Tax Key Number Level 3 Site, Landscaping, Architectural Plan Review \$5,00.00 (Project Cost \$5,001 +) Current Zoning Stevenson Properties LLC ☐ Site, Landscaping, Architectural Plan Amendments \$100.00 Property Owner 11139 W. Becher St. Extension of Time: \$250.00 Property Owner's Address West Allis, WI 53227 ☐ Signage Plan Review \$100.00 ☐ Signage Plan Appeal: \$100.00 Existing Use of Property _ × 425,000,00 Total Project Cost Estimate: __ Request for Rezoning: \$500.00 (Public Hearing required) Existing Zoning: ___ Previous Occupant 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 In order to be placed on the Plan Commission ☐ Certified Survey Map Re-approval: \$50.00 agenda, the Department of Development MUST 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 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_ Date: 10-1-10 Applicant or Agent Signature Subscribed and sworn to me this ____, 20_1 () October day of Please make checks payable to: