

# Planning Application



Project Name Sunrise Citgo (CLASS A + FACADE)

## Applicant or Agent for Applicant

Name RAMZAN Charania  
 Company National Petro of West Allis  
 Address 9530 W National Ave  
 City West Allis State WI Zip 53227  
 Daytime Phone Number 414 915 6000  
 E-mail Address Charania786@aol.com  
 Fax Number \_\_\_\_\_

## Agent is Representing (Tenant/Owner)

Name \_\_\_\_\_  
 Company \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Daytime Phone Number \_\_\_\_\_  
 E-mail Address \_\_\_\_\_  
 Fax Number \_\_\_\_\_

## Property Information

Property Address 9530 W National Ave  
 Tax Key No. 479-0424-002  
 Aldermanic District 4  
 Current Zoning C-3 Community Commercial  
 Property Owner National Petro of Wis LLC  
 Property Owner's Address 9530 W National Ave  
West Allis WI 53227  
 Existing Use of Property Gas Station  
 Previous Occupant \_\_\_\_\_

Total Project Cost Estimate \$9,000

## 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 10/24/18  
 Common Council Introduction 11/6/18  
 Common Council Public Hearing 11/20/18

Applicant or Agent Signature [Signature] Date 10-5-18

Property Owner Signature [Signature] Date 10-5-18



Oper: WAL88JB1 Type: DC Drawer: 1  
Date: 10/09/10 01 Receipt no: 67066  
GH DEV SPECIAL USE PERMIT  
1.00 \$500.00  
OKLAHOMA BP INC  
GP DEV SITE/LAND/ARCH AMEND  
1.00 \$100.00  
OKLAHOMA BP INC  
CK CHECK PAYMEN 1003 \$600.00  
Total tendered \$600.00  
Total payment \$600.00  
Trans date: 10/09/10 Time: 15:35:23