

# Planning Application



Project Name BONITA'S / BRANCH LIFE

## Applicant or Agent for Applicant

Name Fernando Walker  
 Company Bonita's Branch Life  
 Address 1412 S 73rd Street  
 City West Allis State WI Zip 53214  
 Daytime Phone Number 414-333-0684  
 E-mail Address Fernando.Walker@gmail.com  
 Fax Number \_\_\_\_\_

## Agent is Representing (Tenant/Owner)

Name DAVID MEYER  
 Company DAVID MEYER ARCHITECT  
 Address 225 E. S. Paul Ave #3  
 City MILWAUKEE State WI Zip 53202  
 Daytime Phone Number 414-903-1025  
 E-mail Address DAVID@DAVIDMEYERARCHITECTS.CO  
 Fax Number \_\_\_\_\_

## Property Information

Property Address 1412 S 73rd St  
 Tax Key No. 453-0693-000  
 Aldermanic District C1 Bid district 2  
 Current Zoning C1  
 Property Owner MEKE RAI'S  
 Property Owner's Address North Central LLC  
6619 W. Buckleigh St - Milw 53210  
 Existing Use of Property First Floor on Second Floor B  
 Previous Occupant Antique Store  
 Total Project Cost Estimate 30,000

## 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 3/27/19  
 Common Council Introduction 3/19/19  
 Common Council Public Hearing 4/1/19

Applicant or Agent Signature \_\_\_\_\_ Date \_\_\_\_\_

Property Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

