# Planning Application

Project Name Land Splitting Proposal

## Applicant or Agent for Applicant

Name Jarrod Barber, Claire Childre, Rebecca Childre, Cory Kammenberg
Company N/A
Address 2161 S. 68th St
City West Allis State WI Zip 53219
Daytime Phone Number 414-837-9131
E-mail Address rchild20@gmail.com

## Agent is Representing (Tenant/Owner)

Name Michael, Karol, & Kristine Kulas
Company N/A
Address 1827 W. Abbott Ave.
City Milwaukee State WI Zip 53221
Daytime Phone Number
E-mail Address

## Property Information

Property Address 275 S. Waukesha Rd.
Tax Key No. 521-9937-002
Aldermanic District 5
Current Zoning RA-1
Property Owner Michael, Karol, & Kristine Kulas
Property Owner's Address 1827 W. Abbott Ave. Milwaukee, WI, 53221
Existing Use of Property Vacant lot
Previous Occupant N/A

Total Project Cost Estimate

**In order to be placed on the Plan Commission agenda, Planning & Zoning MUST receive the following by the last Friday of the month, prior to the month of the Plan Commission meeting.**

- [x] Completed Application
- [x] Corresponding Fees
- [x] Project Description
- [ ] Set of plans (electronic) - check all that apply
  - [ ] Site/Landscaping/Screening Plan
  - [ ] Floor Plans
  - [ ] Elevations
  - [x] Certified Survey Map
  - [ ] Other

**Items shall be emailed to Planning@westalliswi.gov**
**Please make checks payable to: City of West Allis**

## Application Type and Fee
(Check all that apply)

- [ ] Special Use: (Public Hearing Required) $525
- [ ] Level 1: Site, Landscaping, Architectural Plan Review $125 (Project Cost $0-$1,999)
- [ ] Level 2: Site, Landscaping, Architectural Plan Review $275 (Project Cost $2,000-$4,999)
- [ ] Level 3: Site, Landscaping, Architectural Plan Review $525 (Project Cost $5,000+)
- [ ] Site, Landscaping, Architectural Plan Amendment $125
- [ ] Extension of Time $275
- [ ] Master Sign Program Review $125
- [ ] Sign Plan Appeal $125
- [ ] Request for Rezoning $600 (Public Hearing Required) Existing Zoning: _____ Proposed Zoning: _____
- [ ] Planned Development District $1,525 (Public Hearing Required)
- [ ] Subdivision Plats $1,700
- [x] Certified Survey Map $750
- [ ] Certified Survey Map Re-approval $75
- [ ] Street or Alley Vacation/Dedication $525
- [ ] Formal Zoning Verification $225

**FOR OFFICE USE ONLY**
Application Received
Plan Commission 6/23/21
Publication Date
Common Council Introduction
Common Council Public Hearing 7/13/21

Applicant or Agent Signature Jarrod W. Barber & Rebecca Childre Date 05/26/2021

Property Owner Signature Date

CITY OF WEST ALLIS
28 MAY '21 PM 12:03

CITY OF WEST ALLIS
*** CUSTOMER RECEIPT ***
Oper: WALSBJB1 Type: OC Drawer: 1
Date: 6/01/21 01 Receipt no: 31904

| Description | Quantity | Amount |
|---|---|---|
| GL -1 CERTIFIED SURVEY MAP | 1.00 | $695.00 |
| Trans number: | | 2428028 |
| G/L account number: | | |
| 10000004440101 | | |
| CLAIRE CHILDRE | | |
| GL -2 CNTY CERT SURVEY MAP | 1.00 | $30.00 |
| Trans number: | | 2428029 |
| G/L account number: | | |
| 10000004440101 | | |
| CLAIRE CHILDRE | | |

| Tender detail | | |
|---|---|---|
| CK CHECK PAYMEN | 1003 | $750.00 |
| Total tendered | | $750.00 |
| Total payment | | $750.00 |

Trans date: 6/01/21 Time: 12:24:56

*** THANK YOU FOR YOUR PAYMENT ***

CITY OF WEST ALLIS
*** CUSTOMER RECEIPT ***
Oper: WALSBJB1 Type: OC Drawer: 1
Date: 6/01/21 01 Receipt no: 31904

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Trans date: 6/01/21 Time: 12:24:56

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CITY OF WEST ALLIS
*** VOID RECEIPT ***
Oper: WALSBJB1 Type: OC Drawer: 1
Date: 6/01/21 01 Receipt no: 31898

| Description | Quantity | Amount |
|---|---|---|
| GL -1 CERTIFIED SURVEY MAP | 1.00 | $695.00 |
| Trans number: | | 2428019 |
| G/L account number: | | |
| 10000004440101 | | |
| CLAIRE CHILDRE | | |
| GL -2 CNTY CERT SURVEY MAP | 1.00 | $30.00 |
| Trans number: | | 2428020 |
| G/L account number: | | |
| 10000004440101 | | |
| CLAIRE CHILDRE | | |

| Tender detail | | |
|---|---|---|
| CK CHECK PAYMEN | 1003 | $725.00 |
| Total tendered | | $725.00 |
| Total payment | | $725.00 |

Trans date: 6/01/21 Time: 12:07:42

*** THANK YOU FOR YOUR PAYMENT ***

CITY OF WEST ALLIS
*** CUSTOMER RECEIPT ***
Oper: WALSBJB1 Type: OC Drawer: 1
Date: 6/01/21 01 Receipt no: 31898

| Description | Quantity | Amount |
|---|---|---|
| GL -1 CERTIFIED SURVEY MAP | 1.00 | $695.00 |
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