Planning Application



Agent is Representing (Tenant/Owner)

Project Name The Market at Six Points (Bistro SUP) (Restaurant)

Applicant or Agent for Applicant

lamelan Martin	Name <u>lan Martin</u>
Company <u>Mandel Group, Inc.</u>	Company Mandel Group, Inc.
ddress <u>301 E. Erie Street</u>	Address 301 E. Erie Street
City Milwaukee State WI Zip 53202	City <u>Milwaukee</u> State <u>WI</u> Zip <u>53202</u>
Daytime Phone Number 414.270.2745	Daytime Phone Number 414.270.2745
-mail Address <u>imartin@mandelgroup.com</u>	E-mail Addressimartin@mandelgroup.com
ax Number <u>414.347.3619</u>	Fax Number 414.347.3619
Property Information	Application Type and Fee (Check all that apply)
eroperty Address 1569 5 Fit Points Crossing ax Key NoTBD	X Special Use: (Public Hearing Required) \$500 GH
Aldermanic District District 1	 Level 1: Site, Landscaping, Architectural Plan Review \$100 (Project Cost \$0-\$1,999)
Current Zoning <u>C-3, PDD-1</u> Property Owner <u>West Allis Community Development Authority</u>	 Level 2: Site, Landscaping, Architectural Plan Review \$250 (Project Cost \$2,000-\$4,999)
Property Owner's Address <u>7525 W Greenfield Avenue, West</u>	 Level 3: Site, Landscaping, Architectural Plan Review \$500 (Project Cost \$5,000+)
ixisting Use of Property	Site, Landscaping, Architectural Plan Amendment \$100
Previous Occupant West Allis Community Development	Extension of Time \$250
Authority	Signage Plan Appeal \$100
otal Project Cost Estimate	Request for Rezoning \$500 (Public Hearing Required) Existing Zoning:
In order to be placed on the Plan Commission	Request for Ordinance Amendment \$500
agenda, the Department of Development MUST	Planned Development District \$1,500
receive the following by the last Friday of the month,	(Public Hearing Required)
prior to the month of the Plan Commission meeting.	□ Subdivision Plats \$1,700
Completed Application	□ Certified Survey Map \$600
Corresponding Fees	Certified Survey Map Re-approval \$50
Project DescriptionOne (1) set of plans (24" x 36")	Street or Alley Vacation/Dedication \$500
□ Site/Landscaping/Screening Plan	Transitional Use \$500 (Public Hearing Required)
☐ Floor Plans ☐ Elevations	SECTION AND ADMINISTRATION OF THE PROPERTY OF
Certified Survey Map Other	Formal Zoning Verification \$200
 One (1) electronic copy of plans 	FOR OFFICE USE ONLY
One (1) electronic copy of plans Total Project Cost Estimate	Plan Commission 5-25-16

City of West Allis | 7525 W. Greenfield Ave. | West Allis, WI 53214 (414) 302-8460 | (414) 302-8401 (Fax) | www.westalliswi.gov/planning

04/28/2016

MANDEL GROUP, INC.

CHECK NO: 0000042728 CITY OF WEST ALLIS (CITYWE)

Invoice Date Invoice Number Property ID Expense Code Amount Paid

04/28/2016 ZONING&SUB APP FEES 10100 1340-005 \$6,200.00 \$6,200.00

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