

Planning Application



Project Name Fast Forward Fitness

Applicant or Agent for Applicant

Name Darrell Jack
 Company Fast Forward Fitness
 Address 8365 N River Rd
 City River Hills State WI Zip 53217
 Daytime Phone Number 262-325-0272
 E-mail Address fastforwardfitness@yahoo.com
 Fax Number _____

Agent is Representing (Tenant/Owner)

Name Darrell Jack
 Company Fast Forward Fitness LLC
 Address 8365 N. River Rd.
 City River Hills State WI Zip 53217
 Daytime Phone Number 262-325-0272
 E-mail Address fastforwardfitness@yahoo.com
 Fax Number _____

Property Information

Property Address 9730 W Greenfield Ave
 Tax Key No. 443-0359-000
 Aldermanic District 3
 Current Zoning C-2/Neighborhood Commercial
 Property Owner Darrell Jack
 Property Owner's Address 8365 N River Rd
River Hills WI 53217
 Existing Use of Property Personal Training
 Previous Occupant Car Parts
 Total Project Cost Estimate under \$2000

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 \$600
- ☐ Certified Survey Map Re-approval \$50
- ☐ 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")
 - ☒ 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 5/25/2016
 Common Council Introduction 6/7/16
 Common Council Public Hearing 6/7/16

Applicant or Agent Signature Darrell Jack Date 4/12/16
 Property Owner Signature Darrell Jack Date 4/12/16



Oper: WALSBJB1 Check: 1448
 Date: 4/15/16 01 Recpt no: 34159
 CHECK PAYMENTS \$600.00
 Amount tendered \$600.00
 FOR DEPOSIT ONLY IN
 TRI-CITY NATL BK
 CITY OF WEST ALLIS #17107-250

Oper: WALSBJB1 Type: OC Drawer: 1
 Date: 4/15/16 01 Receipt no: 34159
 GH DEV SPECIAL USE PERMIT 1.00 \$500.00
 FAST FORWARD FITNESS LLC 1.00 \$100.00
 GM DEV LVL 1 SITE ARCH PLN R
 FAST FORWARD FITNESS 1448 \$600.00
 CK CHECK PAYMEN \$600.00
 Total tendered \$600.00
 Total payment \$600.00
 Trans date: 4/29/16 Time: 10:11:52