



**CITY OF WAUKESHA  
PLAN COMMISSION**

**RECEIVED**

AUG 13 2018

CITY PLAN COMMISSION  
Date Submitted

**Application for Review**

**Name of Project:** SUNRISE LIQUOR  
**Address (If no address, location):** 518 DELAFIELD ST WAUKESHA 53188  
**Project Description:** ZONE B3 to ReZONE

**Applicant information:**

Name: Jagdish Kumar Patel  
 Company Name: SUNRISE LIQUOR  
 Address: 518 Delafield St  
Waukesha 53188  
 Phone: 414-213-4642  
 E-mail: kush.patel@ gmail.com

**Owner information:**

Name: \_\_\_\_\_  
 Company Name: \_\_\_\_\_  
 Address: SAME  
 Phone: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

IMPORTANT: A DIGITAL copy must be submitted with this application (JPG and/or PDF) and include the project location map showing a 1/2 mile radius, a COLORED landscape plan, COLORED building elevations, and exterior light fixture cut sheets.

<u>TYPE OF REVIEW</u>	<u>FEE</u>
<input checked="" type="checkbox"/> <b>Rezoning:</b> Attach COPY of rezoning petition along with fee. Original must be submitted to City Clerk.	\$350
<input type="checkbox"/> <b>Certified Survey Map</b>	\$150 + \$50/lot
<input type="checkbox"/> <b>Plat Review - Plat Reviews</b> are held until next meeting. 9 copies must be submitted. You must also submit 4 to the County and 2 to State. (Check appropriate box)	<input type="checkbox"/> <b>prelim.:</b> \$500 + \$10/lot <input type="checkbox"/> <b>final:</b> \$300 + \$10/lot
<input type="checkbox"/> <b>** Site Plan &amp; Arch. Review -</b> Architectural changes do not need preliminary review. (Check appropriate box)	<input type="checkbox"/> <b>prelim.:</b> \$300 + \$15/1000 sq.ft. or res. unit <input type="checkbox"/> <b>final:</b> \$200 + \$10/1000 sq.ft. or res. unit
<input type="checkbox"/> <b>** Conditional Use with Site Plan</b> (Check appropriate box)	<input type="checkbox"/> <b>prelim.:</b> \$300 + \$15/1000 sq.ft. or res. unit <input type="checkbox"/> <b>final:</b> \$200 + \$10/1000 sq.ft. or res. unit
<input type="checkbox"/> <b>Conditional Use (No Site Plan)</b>	\$200
<input type="checkbox"/> <b>** Airport Hangar Review</b>	\$300
<input type="checkbox"/> <b>Home Industry (Attach info sheet.)</b>	\$100
<input type="checkbox"/> <b>House Move</b>	\$150
<input type="checkbox"/> <b>Street Vacation</b>	\$150
<input type="checkbox"/> <b>Other (specify):</b> _____	\$100
<input type="checkbox"/> <b>** PUD Review</b>	\$400 added to S.P.A.R. fee
<input type="checkbox"/> <b>PUD Amendment</b>	\$100
<input type="checkbox"/> <b>Annexations and/or Attachments - Original must be submitted to City Clerk.</b>	No Fee
<input type="checkbox"/> <b>Resubmittal</b>	\$150

\*\* Please attach to this form a Review Checklist if it involves an architectural and/or site plan review.

**DEADLINE FOR THE SUBMITTAL IS AT 4:00 P.M., 30 DAYS PRIOR TO THE MEETING.**

INTERNAL USE ONLY			
Amount Due: <u>\$350-</u>	Check #: <u>6059</u>	Amount Paid: <u>\$350-</u>	Rec'd By: <u>ma</u>

PETITION FOR AMENDING

THE CITY OF WAUKESHA'S ZONING ORDINANCE

We, the undersigned, being owners of all or part of the area involved, humbly petition the Common Council of the City of Waukesha to rezone the following described property from B1 to B3.

Legal Description:

SELOAM SPRING blk Spence's Hyde Park  
and pt NW 1/4 SEC 3 T6N & SW 1/4 SEC  
34 T7N R19E EXC PT IN DELAFIELD &  
RANDALL STS & DOC NO 4026334

The reason(s) for the Rezoning Petition are:

Signature of Owner(s)

J. Patel.

Owner's Name (please print)

Jayalish Patel

Address of Owner

5096 W Berkshire Dr  
Franklin, WI 53132

Phone No. of Owner

414-213-4642

E-mail Address of Owner

\_\_\_\_\_

To: Waukegan Zoning Committee.

Dear Committee Member,

I, Jagdish Patel would like to Request to change zoning for ~~222~~ 518 Delafield St Waukegan. here I confirm that I am a Property owner.

We would like this change to offer New Services to Neighbour hood and Surrounding Waukegan area.

Please contact me if you <sup>need</sup> any more information.

Thank you

Jagdish Patel

414-213-4642