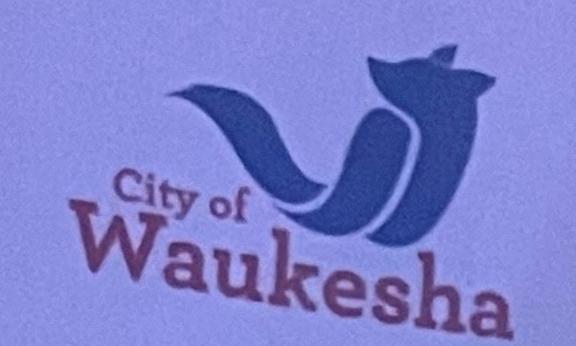
Last Revision
Date:
February 2024

Date Paid:



## City of Waukesha Application for Development Review

City of Waukesha Community Development Department - 201 Delafield Street, Waukesha, WI 53188 262-524-3750
City of Waukesha Department of Public Works Engineering Division—201 Delafield Street, Waukesha, WI 53188 262-524-3600

APPLICAN	w.waukesha-wi.gov
APPLICANT INFORMATION  Applicant Name: Brook o Poddie	PROPERTY OWNER INFORMATION
Applicant Company Name: BB'S on Main	Applicant Name: Drooke recuri
Address: (00% Name: 1010 S ON WALLIN	Applicant Company Name: 1815 5 0 1 10 10 10 10 10 10 10 10 10 10 10 10
City, State: OCON ON O	Address: 362 W Main 57
Phone: 2(2) - 349- Q(29	City, State: Waukesha W1 Zip: 53186
	E-Mail: brooke peddie 3@9 mail: com
ARCHITECT/ENGINEER/SURVEYOR INFORMATION Name:	PROJECT & PROPERTY INFORMATION
Company Name:	Project Name:
Address:	Property Address
	Tax Key Number(s):
City, State: Zip:	Zoning:
Phone:	Total Acreage: Existing Building Square Footage
E-Mail:	Proposed Building/Addition Square Footage:
	Current Use of Property:
Il submittals require a complete scaled set of digital plans (Adobe PDs, a COLOR landscape plan, COLOR building elevation plans, and extending is required prior to submittal of any applications for Subdivisions of the deadline for all applications requiring Plan Companies.	ons, Planned Unit Developments, and Site and Architectural Plan
e meeting date. The Plan Commission meets the Fourth W	<u>lednesday</u> of each month.
PLICATION ACKNOWLEDGEMENT AND SIGNATURES	
reby certify that I have reviewed the City of Waukesha Development Hand	
I also authorize The City of Waukesha or its agents to enter upon the prolicant Signature  Signature Brooke Peddie  Licant Name (Please Print) Brooke Peddie	rmation may result in a delay of the review of your application. By signing
I also authorize The City of Waukesha or its agents to enter upon the prolicant Signature  Signature  Signature PDF of all required information. Any missing or incomplete info  I also authorize The City of Waukesha or its agents to enter upon the pro-  Signature PDF of all required information. Any missing or incomplete info  I also authorize The City of Waukesha or its agents to enter upon the pro-  Signature PDF of all required information. Any missing or incomplete info  I also authorize The City of Waukesha or its agents to enter upon the pro-  Signature PDF of all required information. Any missing or incomplete info  I also authorize The City of Waukesha or its agents to enter upon the pro-  Signature PDF of all required information. Any missing or incomplete info  I also authorize The City of Waukesha or its agents to enter upon the pro-  Signature PDF of all required information. Any missing or incomplete info  I also authorize The City of Waukesha or its agents to enter upon the pro-  Signature PDF of all required information. Any missing or incomplete info  I also authorize The City of Waukesha or its agents to enter upon the pro-  Signature PDF of all required information. Any missing or incomplete info  I also authorize The City of Waukesha or its agents to enter upon the pro-  Signature PDF of all required info  I also authorize The City of Waukesha or its agents to enter upon the pro-  Signature PDF of all required info  I also authorize The City of Waukesha or its agents to enter upon the pro-  Signature PDF of all required info  I also authorize The City of Waukesha or its agents to enter upon the pro-  Signature PDF of all required info  I also authorize The City of Waukesha or its agents to enter upon the pro-  Signature PDF of all required info  I also authorize The City of Waukesha or its agents to enter upon the pro-  Signature PDF of all required info  I also authorize The City of Waukesha or its agents to enter upon the pro-  Signature PDF of all required info  I also authorize The City of	rmation may result in a delay of the review of your application. By signing
I also authorize The City of Waukesha or its agents to enter upon the prolicant Signature  Brooke  Peddie  Licant Name (Please Print)  Brooke  Peddie  Licant Name (Please Print)	