

The reasons for this rezoning petition are:

Establish the appropriate zoning for the property to allow for the development of a state of the art carwash.

Parcel 1

Signature of Owner(s): T.C. Schwetz

Owner's Name (Printed): T.C. SCHWETZ (TDK LLC)

Address of Owner: 1603 MANHATTAN DR.
WALKERSLA, WI 53186

Phone Number of Owner: 262-310-5105

Parcel IV

Signature of Owner(s): _____

Owner's Name (Printed): _____

Address of Owner: _____

Phone Number of Owner: _____



**CITY OF WAUKESHA
PLAN COMMISSION**

Application for Review

Date Submitted _____

Name of Project: COAST CAR WASH

Address (if no address, location): W 227 S1584 ANITOL AVE

Applicant information:

Name: MIKE + BETH KLUMB
 Company Name: COAST CAR WASH, LLC
 Address: N 1993 BIRCHES DRIVE
LAKE GENEVA, WI 53147
 Phone: 262-613-5566

Owner information:

Name: SAME
 Company Name: TIX LLC
 Address: 1603 MANHATTAN DR.
WAUKESHA, WI 53186
 Phone: 262-370-5105

IMPORTANT: A DIGITAL copy must be submitted with this application (JPG and/or PDF) along with 4 full-size (one of which must be in COLOR) and 7 reduced copies unless waived by the department. The reduced set of copies should only include the project location map showing a 1/2 mile radius, a COLORED landscape plan, COLORED building elevations, and exterior light fixture cut sheets.

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

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

DEADLINE FOR THE SUBMITTAL IS THE MONDAY FOUR WEEKS BEFORE THE MEETING BY 4:00 P.M.

INTERNAL USE ONLY			
Amount Due: _____	Check #: _____	Amount Paid: _____	Rec'd By: _____

Rev. 03/2015