



**CITY OF WAUKESHA  
PLAN COMMISSION**

**Application for Review**

Date Submitted \_\_\_\_\_

Name of Project: T-Mobile Parallel ML53108

Address (if no address, location): 3031 Summit Avenue, Waukesha, WI 53188

**Applicant information:**

Name: Darrell Snodgrass - Agent  
 Company Name: T-Mobile USA / Parallel Infrastructure  
 Address: ING Wireless, 1829 Fortrose Drive  
Indianapolis, IN 46231  
 Phone: 317-979-1212

**Owner information:**

Name: Coletta Manske  
 Company Name: Christ the Life Evangelical Lutheran Church  
 Address: 3031 Summit Avenue  
Waukesha, WI 53188  
 Phone: 262-366-1176

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.

<u>TYPE OF REVIEW</u>	<u>FEE</u>
<input 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"/> prelim.: \$500 + \$10/lot <input type="checkbox"/> final: \$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"/> 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"/> <b>** Conditional Use with Site Plan</b> (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"/> <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 THE MONDAY FOUR WEEKS BEFORE THE MEETING BY 4:00 P.M.**

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