

## CITY OF WAUKESHA DEPARTMENT OF COMMUNITY DEVELOPMENT CEIVED

City Hall, 201 Delafield Street, Room 200 Waukesha, WI 53188 Phone (262) 524-3750 Fax (262) 524-3751

DEC 5 2014

## CONDITIONAL USE PERMIT APPLICATION

This application must accompany a Plan Commission Application along with the required fee.

DATE: 11-30-3014
NAME OF PROJECT OR BUSINESS: ONLY HIDS UNIVERSITY (OKU)
LOCATION OF USE: 3444 N. GRANDVIEW BLVD. WAUKESHA, INI 53188
TYPE OF USE: CHILD CARE
Is this a NEW use or is this use being relocated from somewhere else? <u>KELOCATED</u>
If you are relocating a use, where are you relocating it from? 1500 N. UNIVERSITY DR.
Do you operate a use in other locations? ? (Circle one) YES NO
If yes, please explain:
Will the use be occupying an existing building or will you be building a new building? EXISTING NEW
Hours and days of operation: MONDAY THROUGH FRIDAY 6:30 a.m 5:30 p.m.
Number of Employees: Four
Number of on-site parking stalls available: FOURTEEN
Length of permit requested (6 month, 1 year, 2 year, permanent): <u>FERMANENT</u>
Current zoning:
Is a License required to operate this use? (Circle one) YES NO If yes, please attach a copy.
Name of licensing authority: <u>DEPARTMENT OF CHILDREN &amp; FAMILIES</u>
Will any hazardous materials be used?
The following information must be attached to process the permit:
$oxed{oxed}$ A site map showing the location of the proposed site.
$oxed{\boxtimes}$ A site plan showing the location of building(s), parking, landscaping, etc.
$\square$ A floor plan of the building showing how it will be used for the proposed use.
If an existing building, a photo of the building.
$\square$ If new, complete development plans must be submitted per the development guidelines.
$\square$ If facade changes are proposed, plans must be submitted showing changes.
$\square$ A business plan if there is one, otherwise answer the questions on the back.

Please Note: If approved, this permit will be issued to the applicant only and will not be transferrable. This application will become null and void if required fees and materials are not submitted at time of application.

Please attach a copy of your Business Plan if you have one. If you do not have written Business Plan or choose not to share it, please answer the following questions: What business will you be in? TRESCHOOL / CHILD CARE 1. 2. Explain your business' daily operations. THE CHILDREN ARE EXPOSED TO A VARIETY OF EXPERIENCES THAT GREATLY ENRICH THEIR DEVELOPHENTAL YEARS. I OFFER A VARIETY OF GUEST SPEAKERS, FLELDTRIPS AND RARBLY FOUND AT OTHER CENTERS. PARENTS SEEK ME OUT TO PLACE THEIR CHILDREN IN MY CARE. How will business be managed on a daily basis? My MANAGEMENT STYLE IS TO HAVE A 3. POSSITIVE WORKING RELATIONSHIP WITH THE PARENTS, I BELIEVE THIS IS CRITICAL TO THE CHILD'S SUCCESS IN DAYCARE, A PARENT MUST HAVE THE CONFIDENCE THAT THE CHILD'S NEEDS WILL BE FULLY REALIZED AND MET. What are your products or services? I PROVIDE ESSENTIAL CHILD DEVELOPMENT 4. CURRICULUM BALANCES WITH " DEAY". I PROVIDE HIGH QUALITY CARE THAT PLITS BOTH PARENTS AND THEIR CHILDREN AT EASE. THIS IS NOT SOMETHING I HAVE OBSERVED FROM A LARGE, FRANCHISED-BASED CENTER. Will your employees need additional parking? \_\_\_\_\_\_// 5. Are employees required to have any certification(s)? 6. Who is the owner of the building or premises where your business will be conducted? 7. BUDDEN 3444 N. GRANDVIEW BLUD. - FARTHEST WEST BUILDING (1A. If you are not owner of the building or premises where your business will be conducted, do you have 8. a lease agreement with the owner? AWAITING CONDITIONAL USE PERHIT

Are there any insurance requirements for your business? <u>VE5</u>

Will you have property insurance? <u>VES</u>

Are there any noise considerations/concerns with your business operations?

9.

10.

11.



2444 N. Grandview

Imagery ©2014 Google, Map data ©2014 Google 50 ft

RECEIVED

DEC 5 2014

CITY PLAN COMMISSION



## RECEIVED

DEC 5 2014

**CITY PLAN COMMISSION**