

## CITY OF WAUKESHA DEPARTMENT OF COMMUNITY DEVELOPMENT

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

## CONDITIONAL USE PERMIT APPLICATION

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

| DATE:  |
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| ☐ NEW APPLICATION ☐ AMENDMENT TO EXISTING CONDITIONAL USE PERMIT   |
| NAME OF PROJECT OR BUSINESS:   |
| LOCATION OF USE:   |
| TYPE OF USE:   |
| Is this a NEW use or is this use being relocated from somewhere else?  |
| If you are relocating a use, where are you relocating it from?   |
| 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:   |
| Number of Employees:   |
| Number of on-site parking stalls available:  |
| Length of permit requested (6 month, 1 year, 2 year, permanent):   |
| Current zoning:  |
| Is a License required to operate this use? (Circle one) YES NO If yes, please attach a copy.  Name of licensing authority: |
| Will any hazardous materials be used?  |
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| The following information must be attached to process the permit:  |
| $\square$ A site map showing the location of the proposed site.  |
| $\square$ 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.                                   |
| $\square$ 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.

| What business will you be in?   |
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| Explain your business' daily operations.  |
| How will business be managed on a daily basis?  |
| What are your products or services?   |
| Will your employees need additional parking?  |
| Are employees required to have any certification(s)?  |
| Who is the owner of the building or premises where your business will be conducted?   |
| If you are not owner of the building or premises where your business will be conducted, do you have a lease agreement with the owner? |
| Are there any insurance requirements for your business?   |
| Will you have property insurance?   |
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