CONDITIONAL USE PERMIT APPLICATION

This application must accompany a Plan Commission Application along with the required fee.
The Plan Commission may not make a decision on this request if the property owner is not present at the meeting.

DATE: _2/18/2022_

X DBA - Friends with Food

☑ NEW APPLICATION   ☐ AMENDMENT TO EXISTING CONDITIONAL USE PERMIT

NAME OF PROJECT OR BUSINESS: _SE WI Emergency Support Group Inc_

LOCATION OF USE: _Choice Pantry_

TYPE OF USE: _Food Distribution Non Profit_

Is this a NEW use or is this use being relocated from somewhere else? _Somewhere else - Church_

If you are relocating a use, where are you relocating it from? _Southminster Church_

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 - Friday 9-7, Sat 10-4_

Number of Employees: _4 (No paid Personal Know) Volunteers up to 15_

Number of on-site parking stalls available: _10+ parking_

Length of permit requested (6 month, 1 year, 2 year, permanent): _~~permanent~~ 3 years or longer Lease w/ extension_

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? _NO_

The following information must be attached to process the permit:

☑ A site map showing the location of the proposed site.

☑ A site plan showing the location of building(s), parking, landscaping, etc.

☑ 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.

☐ If new, complete development plans must be submitted per the development guidelines.

☐ If facade changes are proposed, plans must be submitted showing changes.

☐ 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. Any physical changes made to the building may require the installation of additional fire protection systems. Please contact the Fire Marshal for further discussion.
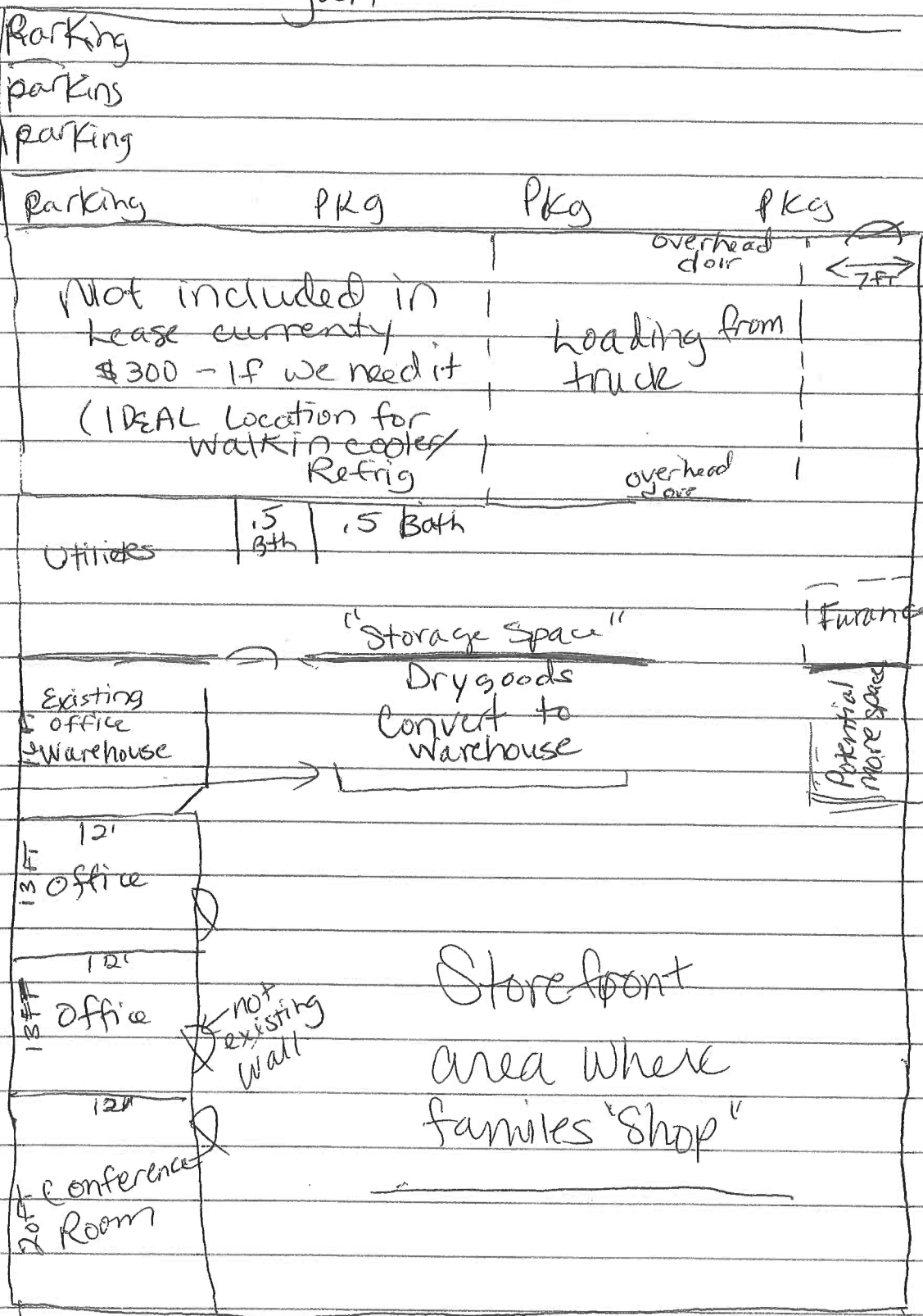
Please attach a copy of your Business Plan if you have one.

If you do not have written Business Plan or choose not to share it, please answer the following questions:

1. What business will you be in? non-profit food pantry

2. Explain your business' daily operations. Monday through Friday 9-7, Saturday 10-4.

3. How will business be managed on a daily basis? Business, Food distribution to those in need.

4. What are your products or services? FREE Food from Feeding Americas Other Food Banks and Bakery Stores

5. Will your employees need additional parking? No

6. Are employees required to have any certification(s)? No Volunteers

7. Who is the owner of the building or premises where your business will be conducted? We are using the whole building

8. 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? yes in works

9. Are there any insurance requirements for your business? $1 Million & 2 Million Aggregate

10. Will you have property insurance? Same as #9

11. Are there any noise considerations/concerns with your business operations? none

Morgan Ave

Extra parking per landlord

Parking
parking
parking

Parking   Pkg   Pkg   Pkg

overhead door

← 7ft →

Not included in Lease currenty $300 - If we need it

(IDEAL location for Walkin cooler/ Refrig

Loading from truck

overhead door

Utilities   .5 Bth   .5 Bath

"Storage Space" Dry goods Convert to Warehouse

Furnace

Concrete Wall

Existing office → Warehouse

Potential more space

Existing countertop Je will Remove

12' Office

12' Office

not existing wall

Storefront area where families "Shop"

12' Conference Room

Parking Handicapped | Parking Handicapped | Parking Handicapped | Parking Handicapped | Parking Handicapped