



**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.
The Plan Commission may not make a decision on this request if the property owner is not present at the meeting.

DATE: 12/1/2019

NEW APPLICATION AMENDMENT TO EXISTING CONDITIONAL USE PERMIT

NAME OF PROJECT OR BUSINESS: Precision Diagnostics, Inc.

LOCATION OF USE: 1701-11W Pearl Street, Waukesha, WI

TYPE OF USE: Automotive Diagnostics / Scanning

Is this a NEW use or is this use being relocated from somewhere else? New

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: 3424 McAllens Way, Madison WI 53718

Will the use be occupying an existing building or will you be building a new building? EXISTING NEW

Hours and days of operation: 7:30 am - 5:30 pm, Monday - Friday

Number of Employees: 6

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? 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? Automotive collision sublet work.
Our customers are Abra, Caliber, Goff and other independent collision centers. (WE Do Not perform collision repairs)
2. Explain your business' daily operations. We will be working on 5-10 vehicles per day. Vehicles take roughly 4-6 hours to complete.
3. How will business be managed on a daily basis? Owner/operator will be managing business daily.
4. What are your products or services? Stationary advance drivers assist system calibration, wire harness repair, air bag repair, tire sensor diagnostics, other electronic diagnostic repair and flat bed transportation. (to and from customer only)
5. Will your employees need additional parking? No
6. Are employees required to have any certification(s)? ICAZ ASE
7. Who is the owner of the building or premises where your business will be conducted? Waukesha East Commerce Center, LLC
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? _____
9. Are there any insurance requirements for your business? Yes, liability
10. Will you have property insurance? Yes
11. Are there any noise considerations/concerns with your business operations?
No