



**CITY OF WAUKESHA
PLAN COMMISSION**

Application for Review

Date Submitted

Name of Project: A New Fire Station No. 3 for the City of Waukesha

Address (If no address, location): Northeast Corner of S.T.H. "59" (Les Paul Parkway) and C.T.H. "X" (Genesee Road)

Applicant information:

Name: Mr. Brian Tom Fischer, A.I.A., P.E., President
 Company Name: Fischer-Fischer-Theis, Inc.
 Address: S22 W22660 Broadway
Waukesha, WI 53186-8199
 Phone: (262) 547-6969

Owner information:

Name: _____
 Company Name: City of Waukesha
 Address: 201 Delafield Street
Waukesha, WI 53188-59332
 Phone: _____

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"/> Rezoning: Attach <u>COPY</u> of rezoning petition <u>along with fee</u> . Original <u>must</u> be submitted to City Clerk.	\$350
<input type="checkbox"/> Certified Survey Map	\$150 + \$50/lot
<input type="checkbox"/> Plat Review - <i>Plat Reviews</i> 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 checked="" type="checkbox"/> ** Site Plan & Arch. Review - Architectural changes do not need preliminary review. (Check appropriate box)	<input checked="" type="checkbox"/> prelim.: \$300 + \$15/1000 sq.ft. or res. unit <input checked="" type="checkbox"/> final: \$200 + \$10/1000 sq.ft. or res. unit
<input type="checkbox"/> ** Conditional Use with Site Plan (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 type="checkbox"/> Conditional Use (No Site Plan)	\$200
<input type="checkbox"/> ** Airport Hangar Review	\$300
<input type="checkbox"/> Home Industry (Attach info sheet.)	\$100
<input type="checkbox"/> House Move	\$150
<input type="checkbox"/> Street Vacation	\$150
<input type="checkbox"/> Other (specify): _____	\$100
<input type="checkbox"/> ** PUD Review	\$400 added to S.P.A.R. fee
<input type="checkbox"/> PUD Amendment	\$100
<input type="checkbox"/> Annexations and/or Attachments - Original must be submitted to City Clerk.	No Fee
<input type="checkbox"/> Resubmittal	\$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: _____