

## CITY OF WAUKESHA **PLAN COMMISSION**

## Application for Davious

Name of Project: Soft Water Inc.  Address (If no address, location): WALCI355062004  Project Description: New Office Showroom and Owner information:  Name: Sim Dallas  Company Name: Meller Inc.  Address: Address: Address:	ie ter. Inc
Project Description:  Applicant information:  Name: Jim Dallas  Name: Steve Mack	ie ter. Inc
Applicant information:  Name: Jim Dallas  Name: Steve Macking	ie ter. Inc
Name: Jim Dallas Name: Steve Mack	ter. Inc
Name: Jim Dallas  Company Name: Malles Inc.  Company Name: Sallas Compan	ter. Inc
Company Name: Company Name:	ter. Inc
TIETE THE DORT WAS	LOCK Due
Address: WZOU NOISUS Coldendale Rd. Address: 1344 White To	
Germantown WI 530ZZ Waukesha, Wi	
Phone:	
jobilas@kellerbuilds.com smackie@wi	, rr. com
IMPORTANT: A DIGITAL copy must be submitted with this application (JPG and/or PDF) and include the problem of t	project location map showing a 1/2
mile radius, a COLORED landscape plan, COLORED building elevations, and exterior light fixture cut sheets	S.
TYPE OF REVIEW	FEE
Rezoning: Attach COPY of rezoning petition along with fee. Original must be submitted to City Clerk. \$350	
☐ Certified Survey Map \$150 + \$50/	/lot
	\$500 + \$10/lot
You must also submit 4 to the County and 2 to State. (Check appropriate box) ☐ final: \$30    ** Site Plan & Arch. Review - ☐ prelim.:	00 + \$10/lot \$300 + \$15/1000 sq.ft. or res. unit
Architectural changes do not need preliminary review. (Check appropriate box) <b>final</b> : \$20	00 + \$10/1000 sq.ft. or res. unit
	\$300 + \$15/1000 sq.ft. or res. unit 00 + \$10/1000 sq.ft. or res. unit
☐ Conditional Use (No Site Plan) \$200	oo i gioriooo sq.ii. oi ies. uiit
□ ** Airport Hangar Review \$300	
Home Industry (Attach info sheet.) \$100	
□ House Move \$150	
□ Street Vacation \$150	
□ Other (specify): \$100	
□ ** PUD Review \$400 added	to S.P.A.R. fee
PUD Amendment \$100	
Annexations and/or Attachments - Original must be submitted to City Clerk. No Fee	_
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 AT 4:00 P.M., 30 DAYS PRIOR TO THE MEETING.	
INTERNAL USE ONLY	
Amount Due: Check #: Amount Paid:	Rec'd By: