

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: 12/29 / 7019		
NEW APPLICATION AMENDMENT TO EXISTING CONDITIONAL USE PERMIT		
NAME OF PROJECT OR BUSINESS: Mayor Homes LLC		
LOCATION OF USE: 407 North Grand Ave Warkes 45		
TYPE OF USE: Residential use of B-3 zoned property		
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: Continuous		
Number of Employees:		
Number of on-site parking stalls available: 4		
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?		
The following information must be attached to process the permit:		
☐ 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.		
☐ 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.		
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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: What business will you be in? Residential and commercial leasing 1. Explain your business' daily operations. 2. How will business be managed on a daily basis? Reed Mayor vill manage the lessing of the property 3. What are your products or services? Residential and commercial leasing 4. 5. Will your employees need additional parking? 6. Are employees required to have any certification(s)? no Who is the owner of the building or premises where your business will be conducted? 7. Reed Mayer If you are not owner of the building or premises where your business will be conducted, do you have 8. Are there any insurance requirements for your business? property insurance 9.

App Conditional Use Permit Application, Last revision 6/16/2015

10.

11.

Last Revision Date: 6/18/2018

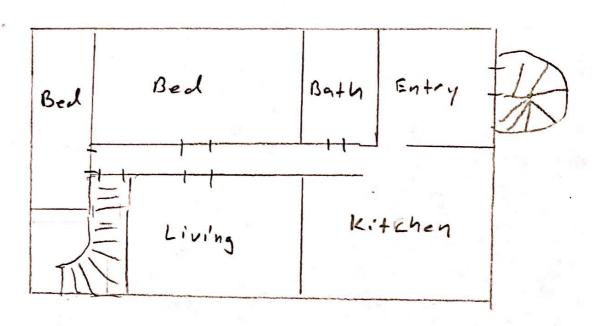
City of

City of Waukesha Application for Development Review

City of Waukesha Community Development Department - 201 Delafield Street, Suite 200, Waukesha, WI 53188 262-524-3750
City of Waukesha Department of Public Works Engineering Division—I30 Delafield Street, Waukesha, WI 53188 262-524-3600
www.waukesha-wi.gov

APPLICANT INFORMATION	PROPERTY OWNER INFORMATION
Applicant Name: Reed Mayer	Applicant Name: Reed Mayer
Applicant Company Name: Mayer Homes LLC	Applicant Company Name: Mayer Homas LLC
Address: W.3155,7463 Lakecrest Ct	Address: W.315 5.7463 Lakecrest Ct
City, State: Mukwonago VI Zip: 53149	City, State: Mukwongso W1 Zip: 57149
Phone: 262-501-3812	Phone: 262-501-3882
E-Mail: reed mayor @gmail.com	E-Mail: reed mayer @gna:1. com
ARCHITECT/ENGINEER/SURVEYOR INFORMATION	PROJECT & PROPERTY INFORMATION
Name:	Project Name:
Company Name:	Property Address 407 N. Grand Ave Wawkes 49
Address:	Tax Key Number(s):
City, State: Zip:	Zoning:
Phone:	Total Acreage: 0.19 Existing Building Square Footage 25/0
E-Mail:	Proposed Building/Addition Square Footage: **D** A*******************************
	Current Use of Property: Residential
PROJECT SUMMARY (please provide a brief project description) Continue to use property	
5 PART 10 TO 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	at 407 N. Grand Ave Wavkesha Residential upper and back 50% lower.
5 PART 10 TO 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	of 407 M. Grand Ave Wealthy Residential upper and back So% lower. OF) and shall include a project location map showing a 1/2 mile raditerior lighting photometric maps and cut sheets. A pre-application ons, Planned Unit Developments, and Site and Architectural Plan mission Reviews is at 4:00 P.M, 30 days prior to the meet-
All submittals require a complete scaled set of digital plans (Adobe PE us, a COLOR landscape plan, COLOR building elevation plans, and ex meeting is required prior to submittal of any applications for Subdivisi Review. The deadline for all applications requiring Plan Commercial	of 407 M. Grand Ave Wealthy Residential upper and back So% lower. OF) and shall include a project location map showing a 1/2 mile raditerior lighting photometric maps and cut sheets. A pre-application ons, Planned Unit Developments, and Site and Architectural Plan mission Reviews is at 4:00 P.M, 30 days prior to the meet-
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upper



Lower

