

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: May 26, 2020
☑ NEW APPLICATION ☐ AMENDMENT TO EXISTING CONDITIONAL USE PERMIT
NAME OF PROJECT OR BUSINESS: Family Promise of Waukesha Resource Center
LOCATION OF USE: 139 E. North Street
TYPE OF USE: Social Service
Is this a NEW use or is this use being relocated from somewhere else? Relocation
If you are relocating a use, where are you relocating it from? Wales
Do you operate a use in other locations? ? (Circle one) YES NO _{NO}
If yes, please explain:
Will the use be occupying an existing building or will you be building a new building? EXISTENSEW
Hours and days of operation: M-F 7 am - 6pm Sat 8am-6pm Sun 7 am- 6pm
Number of Employees: 2 full time 4 part time
Number of on-site parking stalls available: Approximately 10 in the city lot. The parking structure is next doo
Length of permit requested (6 month, 1 year, 2 year, permanent): Permanent
Current zoning: B-2
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:
\square 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.
\square If an existing building, a photo of the building.
\square If new, complete development plans must be submitted per the development guidelines.
\square If facade changes are proposed, plans must be submitted showing changes.
\square 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.

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? Social Services Explain your business' daily operations. The resource center opens each day at 7 am. Families in our shelter program use 2. the day center as a home base. Families in our shelter and prevention program receive case management and access resources for job applications and seeking housing. Periodically workshops will be offered. Families return to the Churches at 6pm How will business be managed on a daily basis? A staff member will be available to greet families every day. A social 3. worker will be on site Monday through Friday. What are your products or services? We provide a homelessness prevention program (rent/utility assistance) and shelter. 4. Local Churches offer space and volunteers to provide shelter. Case Management is offered for families in our programs. We would like to have the option to use the second floor to shelter no more than two families or seven individuals. Will your employees need additional parking? We plan to purchase a parking permit for 2 vans owned by Family Promise. 5. 6. Are employees required to have any certification(s)? No 7. Who is the owner of the building or premises where your business will be conducted? Family Promise of Waukesha County 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? We are purchasing the building. Conditional use permit is a contingency for purchase. Are there any insurance requirements for your business? General Liability, Worker's Compensation 9. 10. Will you have property insurance? Yes 11. Are there any noise considerations/concerns with your business operations?

Please attach a copy of your Business Plan if you have one.