



**CITY OF WAUKESHA
PLAN COMMISSION**

Application for Review

Date Submitted

Name of Project: STARBUCKS MULTI-TENANT

Address (If no address, location): LOT 8 CSM 11104 (LES PAUL PARKWAY, LOT NORTH OF CULVERS)

Project Description: MULTI-TENANT COMMERCIAL BUILDING AND SITE DEVELOPMENT

Applicant information:

Name: JOEL EHRFURTH

Company Name: MACH IV ENGINEERING & SURVEYING

Address: 2260 SALSCHIEDER COURT

GREEN BAY, WI 54313

Phone: 920-569-5765

E-mail: jehrfurth@mach-iv.com

Owner information:

Name: FRED JACQUES

Company Name: EAST WAUKESHA LLC

Address: 230 OHIO STREET, SUITE 201

OSHKOSH, WI 54902

Phone: 920-230-3628

E-mail: fred@alliancedevelopment.biz

IMPORTANT: A DIGITAL copy must be submitted with this application (JPG and/or PDF) and include the project location map showing a ½ mile radius, a COLORED landscape plan, COLORED building elevations, and exterior light fixture cut sheets.

<u>TYPE OF REVIEW</u>	<u>FEE</u>
☐ Rezoning: Attach <u>COPY</u> of rezoning petition <u>along with fee</u> . Original must be submitted to City Clerk.	\$350
☐ Certified Survey Map	\$150 + \$50/lot
☐ Plat Review - Plat Reviews 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)	☐ prelim.: \$500 + \$10/lot ☐ final: \$300 + \$10/lot
☒ ** Site Plan & Arch. Review - Architectural changes do not need preliminary review. (Check appropriate box)	☒ prelim.: \$300 + \$15/1000 sq.ft. or res. unit ☐ final: \$200 + \$10/1000 sq.ft. or res. unit
☐ ** Conditional Use with Site Plan (Check appropriate box)	☐ prelim.: \$300 + \$15/1000 sq.ft. or res. unit ☐ final: \$200 + \$10/1000 sq.ft. or res. unit
☐ Conditional Use (No Site Plan)	\$200
☐ ** 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: _____