

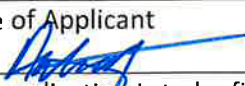


CITY OF SHEBOYGAN
SPECIAL USE AND SITE PLAN REVIEW
APPLICATION

Fee: \$100

Review Date: _____

Read all instructions before completing. If additional space is needed, attach additional pages.

SECTION 1: Applicant/ Permittee Information			
Name (Ind., Org. or Entity) <u>FUNDAMENTALS LLC</u>	Authorized Representative <u>IDETTE ADAMS</u>	Title <u>CEO</u>	
Mailing Address <u>5700 W GRANDE MARKET DR.</u>	City <u>APPLETON</u>	State <u>WI</u>	ZIP Code <u>54913</u>
Email Address [REDACTED]	Phone Number (incl. area code) [REDACTED]		
SECTION 2: Landowner Information (complete these fields when project site owner is different than applicant)			
Name (Ind., Org. or Entity) <u>J&P REAL ESTATE LLC</u>	Contact Person <u>ANTHONY TISLAU</u>	Title <u>PARTNER</u>	
Mailing Address <u>9421 S. SHORE DR.</u>	City <u>VALDERS</u>	State <u>WI</u>	ZIP Code <u>54245</u>
Email Address [REDACTED]	Phone Number (incl. area code) [REDACTED]		
SECTION 3: Architect Information			
Name <u>ANTHONY TISLAU</u>			
Mailing Address <u>W2013 FAIRFIELD LN</u>	City <u>SHEBOYGAN</u>	State <u>WI</u>	Zip <u>53083</u>
Email Address [REDACTED]	Phone Number (incl. area code) [REDACTED]		
SECTION 4: Contractor Information			
Name <u>J&P REALESTATE LLC</u>			
Mailing Address <u>9421 S. SHORE DR.</u>	City <u>VALDERS</u>	State <u>WI</u>	Zip <u>54245</u>
Email Address [REDACTED]	Phone Number (incl. area code) [REDACTED]		
SECTION 5: Certification and Permission			
<p>Certification: I hereby certify that I am the owner or authorized representative of the owner of the property which is the subject of this Site Plan Review Application. I certify that the information contained in this form and attachments are true and accurate. I certify that the project will be in compliance with all conditions. I understand that failure to comply with any or all of the provisions of the permit may result in permit revocation and a fine and/or forfeiture under the provisions of applicable laws.</p> <p>Permission: I hereby give the City permission to enter and inspect the property at reasonable times, to evaluate this notice and application, and to determine compliance with any resulting permit coverage.</p>			
Name of Owner/Authorized Representative (please print) <u>ANTHONY TISLAU</u>	Title <u>PARTNER</u>	Phone Number [REDACTED]	
Signature of Applicant 	Date Signed <u>4.20.20</u>		

Complete application is to be filed with the Department of City Development, 828 Center Avenue, Suite 208. To be placed on the agenda of the City Plan Commission, application must be filed three weeks prior to date of meeting – check with City Development on application submittal deadline date. Applications will not be processed if all required attachments and filing fee of \$100 (payable to the City of Sheboygan) are not submitted along with a complete and legible application. Application filing fee is non-refundable.

SECTION 6: Description of the Subject Site/Proposed Project

Parcel No. 59281629560	Zoning Classification UC	
Name of Proposed/Existing Business: FUNDAMENTALS LLC		
Address of Property Affected: 2040 NORTH AVE SHEBOYGAN, WI 53083		
New Building: <input type="checkbox"/>	Addition: <input type="checkbox"/>	Remodeling: <input checked="" type="checkbox"/>

SECTION 7: Brief Description of Type of Structure

EXISTING PRE ENGINEERED METAL BUILDING

SECTION 8: Description of EXISTING Operation or Use

**EXISTING OPERATION WAS DOSTDYK & WILKE
THEY WERE A COMMERCIAL BUSINESS AND THE LOCATION WAS THEIR
MAIN OFFICE & HUB FOR VEHICLES & INVENTORY**

SECTION 9: Description of the PROPOSED Operation or Use

**PROPOSED OPERATIONS WILL BE A SMALL CHARTER SCHOOL
WITH AN AFTERSCHOOL PROGRAM**