

CITY OF SHEBOYGAN

APPLICATION FOR CONDITIONAL USE

Fee: \$250.00	
Review Date:	
Zoning: UC	

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

SECTION 1: Applicant/ Permittee Information							
Applicant Name (Ind., Org. or Entity) Quasius Construction, Inc.	Authorized Representative Lucas Kaland		Title Superintendent				
Mailing Address 1202A North 8th Street	City Sheboygan		State WI		ZIP Code 53081		
Email Address Phone Number (in Ikaland@quasius.com 920-377-1560		cl. area code)					
SECTION 2: Landowner Information (complete these fields when project site owner is different than applicant)							
Applicant Name (Ind., Org. or Entity) LATA Marketing, LLC	Contact Person Basudev Adhikari		Title Member		1000		
Mailing Address 916 Mulberry Lane	City Kohler		State WI		ZIP Code 53044		
Email Address missionbda@gmail.com	Phone Number (incl. area code) 920-226-1786			2			
SECTION 3: Project or Site Location							
[18] [18] [18] [18] [18] [18] [18] [18]		Parcel No. 59281601911					
SECTION 4: Proposed Conditional Use							
Name of Proposed/Existing Business:	JMart Convenience Store, Spices Restaurant, Postal Store & BP Fueling Station						
Existing Zoning:	Urban Commercial						
Present Use of Parcel:	Vacant lot owned by LATA Marketing, LLC						
Proposed Use of Parcel:	BP Fueling station, Convenience Store, Postal store and small restaurant.						
Present Use of Adjacent Properties: Residential lot to the North of the property, Industrial property Owned by RCS Empowers to the West							
SECTION 5: Certification and Permission							
Certification: I hereby certify that I am the owner or authorized representative of the owner of the property which is							
the subject of this Permit Application. I certify that the information contained in this form and attachments is true and							
accurate. I certify that the project will be in compliance with all permit 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.							
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.							
Name of Owner/Authorized Represent Basudev Adhikari/Lucas Kaland	ative (please print)	Title Superintendent	Phone Number 920-377-1560				
Signature of Applicant Lucas Kaland Graphs depretly some blooms Hill to the first and find the some of the control of the c		Date Signed 8/6/24					

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 \$250 (payable to the City of Sheboygan) are not submitted along with a complete and legible application. Application filing fee is non-refundable.