

	CITY OF SHEBOYGAN SPECIAL USE AND SITE PLAN REVIEW APPLICATION	Fee: <u>\$100</u>
		Review Date: _____
		Zoning: _____

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

SECTION 1: Applicant/ Permittee Information			
Name (Ind., Org. or Entity) <u>GOD CONNECTION</u>	Authorized Representative <u>PAUL R. MERTENS</u>	Title <u>OWNER</u>	
Mailing Address <u>1401 S. 25TH ST</u>	City <u>SHEBOYGAN</u>	State <u>WI</u>	ZIP Code <u>53081</u>
Email Address <u>PAULMERTENS@ICLOUD.COM</u>	Phone Number (incl. area code) <u>920-918-0554</u>		
SECTION 2: Landowner Information (complete these fields when project site owner is different than applicant)			
Name (Ind., Org. or Entity) <u>HM2 PROPERTY MANAGEMENT</u>	Contact Person <u>KEVIN</u>	Title <u>MANAGER</u>	
Mailing Address <u>1313 MICHIGAN AVE</u>	City <u>SHEBOYGAN</u>	State <u>WI</u>	ZIP Code <u>53081</u>
Email Address	Phone Number (incl. area code) <u>920-990-2015</u>		
SECTION 3: Architect Information			
Name <u>N/A</u>			
Mailing Address	City	State	Zip
Email Address	Phone Number (incl. area code)		
SECTION 4: Contractor Information			
Name <u>N/A</u>			
Mailing Address	City	State	Zip
Email Address	Phone Number (incl. area code)		
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 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.			
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 Representative (please print)		Title	Phone Number
Signature of Applicant <u>Paul R. Mertens</u>		Date Signed <u>8/20/2025</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.		Zoning Classification
Name of Proposed/Existing Business:	GOD CONNECTION	
Address of Property Affected:	818 ERIE AVE SHEBOYGAN	
New Building: <input type="checkbox"/>	Addition: <input type="checkbox"/>	Remodeling: <input type="checkbox"/>

SECTION 7: Brief Description of Type of Structure

RETAIL STOREFRONT

SECTION 8: Description of EXISTING Operation or Use

VACANT

SECTION 9: Description of the PROPOSED Operation or Use

A LEARNING CENTER OPEN TO THE PUBLIC FOR
THE STUDY OF JESUS CHRIST THRU:
MOVIES - BOOKS - BIBLE STUDIES -
LECTURES - + FELLOWSHIP AT NO COST.

11:51

LTE 83

The Spices
Restaurant &
Bar Downtown

Gaming
Generations

3D

PARKING

Wisconsin Auto
Title Loans

Brick and Mortar
Hemp Company

Elite Barbershop

Toppers Pizza

ERIE AVE,

71°
AQI 17

Search Maps

