

224-2370



DEPARTMENT OF CITY DEVELOPMENT



Application for Conditional Use Permit

Applicant Name: ALEX LAMBERT

Address: 1028 BLAINE City: RACINE

State: WI Zip: 53405

Telephone: 414-254-1686 Cell Phone: 414-254-1686

Email: qualitycare54@gmail.com

Agent Name: ALEX LAMBERT

Address: 1028 BLAINE City: RACINE

State: WI Zip: 53405

Telephone: 414-254-1686 Cell Phone: 414-254-1686

Email: qualitycare54@gmail.com

Property Address (Es): 1919 MEAD STREET

Current Zoning: R3

Current/Most Recent Property Use: HAIR SALON

Proposed Use: GROCERY STORE

RECEIVED
AUG 28 2024
DEPT. OF CITY DEVELOPMENT
CITY OF RACINE, WI



DEPARTMENT OF CITY DEVELOPMENT



The application will be evaluated using the standards of Sec. 114-154 of the Municipal Code (below). Please use the space to justify and explain how your proposal addresses these conditions; use an additional sheet if necessary.

- (1) The establishment, maintenance, or operation of the conditional use will not be detrimental to, or endanger, the public health, safety, morals, comfort, or general welfare;

NO

- (2) The conditional use will not be injurious to the use and enjoyment of other property in the immediate vicinity for the purposes already permitted, nor substantially diminish and impair property values within the neighborhood;

NO

- (3) The establishment of the conditional use will not impede the normal and orderly development and improvement of the surrounding property for uses permitted in the district;

NO

- (4) Adequate utilities, access roads, drainage and/or necessary facilities have been or are being provided;

YES

- (5) Adequate measures have been or will be taken to provide ingress and egress so designed as to minimize traffic congestion in the public streets;

Yes

- (6) The proposed conditional use is not contrary to the objectives of the current land use plan for the city; and

NO

- (7) The conditional use shall, in all other respects, conform to the applicable regulations of the district in which it is located, except as such regulations may, in each instance, be modified pursuant to the recommendations of the plan commission.

Yes





If the required supplemental materials, which constitute a completed application, are not submitted, the application will not be processed.

Required Submittal Format

1. An electronic submission via email/USB drive/CD/Download link; and
2. One (1) paper copy, no larger than 11" x 17" size.

Required Submittal Item	Applicant Submitted	City Received
1. Conditional Use Review Application	<input type="checkbox"/>	
2. Written description of project, including: <ul style="list-style-type: none"> a. Hours of operation 8:00 AM to 11:00 P.M. b. Anticipated delivery schedule none / DRIVE TO PICK UP c. Maintenance plan KEEP GRASS CUT LITTER CLEAN d. General use of the building and lot HAIR SALON 	<input type="checkbox"/>	
3. Site Plan (drawn to scale), including: <ul style="list-style-type: none"> a. Fully dimensioned property boundary b. All buildings (existing and proposed) c. Setbacks from property lines d. Identification as to whether all elements are "Existing" or "Proposed" e. Dimensioned parking spaces and drive aisle layout Street f. Trash enclosure location and materials Existing g. Loading spaces FRONT DOOR h. Fire hydrant locations i. Location of signage, with setbacks Existing 	<input type="checkbox"/>	
4. Zoning Analysis Table <ul style="list-style-type: none"> a. Land area (in acres and square feet) b. Building area (in square feet) c. Setbacks (required yards in feet) d. Floor Area Ratio (building area divided by lot area) e. Lot Coverage (building footprint divided by lot area) f. Height of all buildings and structures g. Percentage of greenspace (landscaped areas divided by lot area) h. Parking spaces Street 	<input type="checkbox"/>	
5. Landscape Plan <ul style="list-style-type: none"> a. Bufferyards b. Parking Areas Street c. Screening and fencing locations Existing d. Plant lists including the following: Latin and Common Names, Number of each planting material, and Size at planting. MULCH 	<input type="checkbox"/>	





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Required Submittal Item	Applicant Submitted	City Received
6. Lighting Plan a. Location of light fixtures b. A cut sheet of light fixtures with indication of cut-offs or shielding c. Illumination diagram indicating intensity of lighting on the property.	<input type="checkbox"/>	
7. Floor Plan a. Preliminary floor plan layout of all buildings/structures b. Labels for the type of use of the area c. Labels for square footage of the area	<input type="checkbox"/>	
8. Engineering Plan a. Stormwater Plan (Drainage pattern, flow, detention) b. Existing and proposed roadway and access configurations c. Cross access	<input type="checkbox"/>	
9. Signage Plan a. dimensioned color elevations of signage b. A diagram showing the location of the proposed signage	<input type="checkbox"/>	
10. Building/site elevations (if new building or exterior changes planned) a. Building elevations showing all four sides of the buildings in color b. Elevation of trash enclosure area	<input type="checkbox"/>	
11. Building Material Samples (if making exterior changes)	<input type="checkbox"/>	
12. Review Fee	<input type="checkbox"/>	

Acknowledgement and authorization signatures

A conditional use is not like a building permit; applying does not mean it will be approved.

The approval may contain conditions related to the improvement of the site which must be met prior to the issuance of a building occupancy permit. Conditions related to the operational aspect(s) of the business must be complied with at all times. That, in the event site improvement work required by ordinance cannot be completed prior to desired occupancy, a financial assurance, at 100% of the improvement estimate, guaranteeing completion of the required improvements must be placed on file with the City of Racine. Estimates and Assurance documents are subject to the review and final approval by the City. Improvements may include but are not limited to landscaping, fencing, lighting, pavement surfacing and sealing, dumpster enclosures, and exterior building improvements;

The signature(s) hereby certify that the statements made by myself and constituting part of this application are true and correct. I am fully aware that any misrepresentation of any information on this application may be grounds for denial of this application.

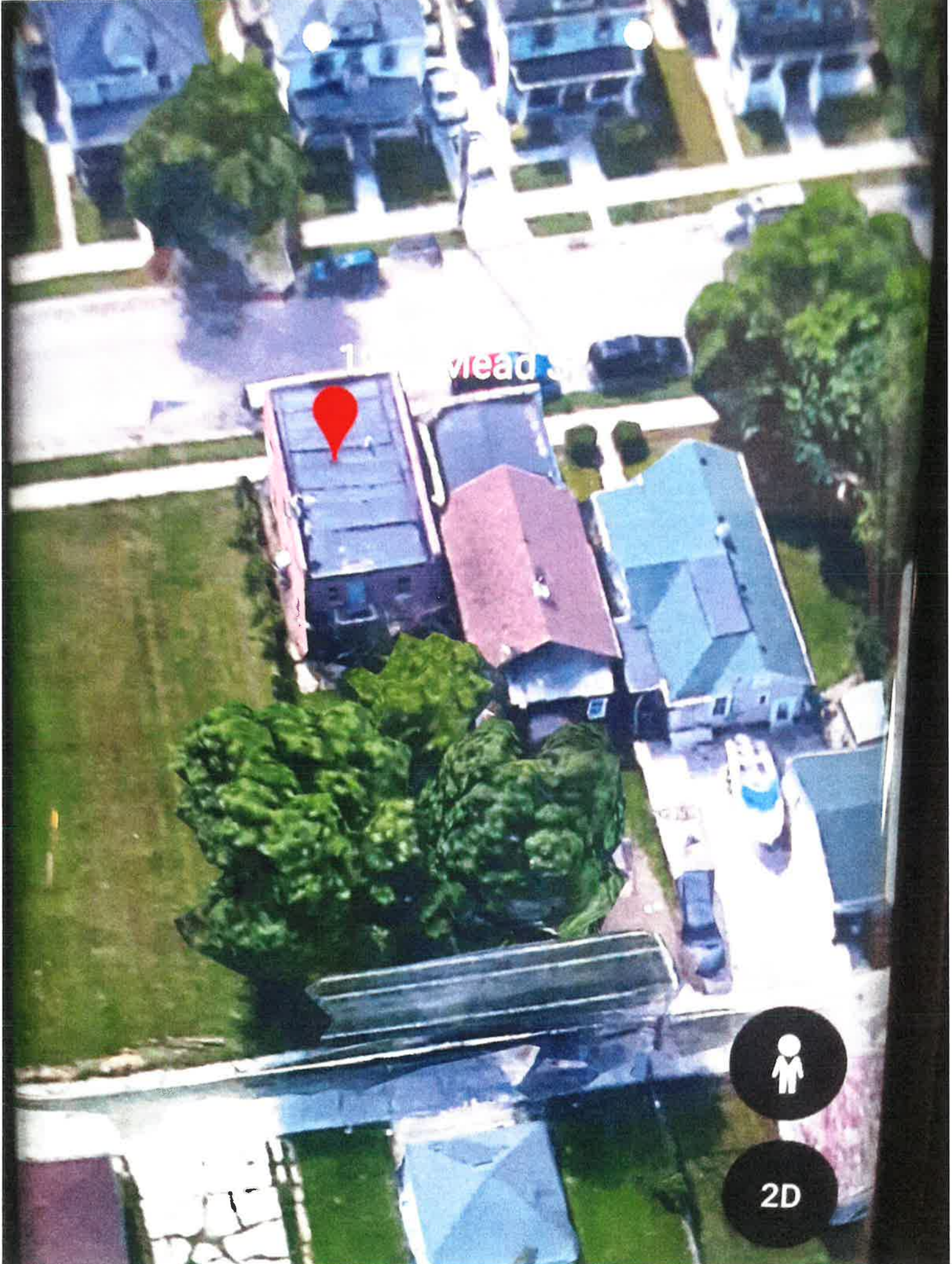
Owner Signature (acknowledgement and authorization): *Ilene Crear* Date: 8-26-24

Applicant Signature (acknowledgement): *Alex Lombort* Date: 8-26-24



8-26-24
City Development

To whom it may concern the property
of 1919 Mead Street, we are trying to
transition to a grocery store. With the
existing signage and city pick up for
garbage. The hours requested would
be 8 AM to 11:00 PM 7 days of the week.
The maintenance plan would be cutting
grass/sweeling and keeping property
clean of debris. The delivery would
be picked up from the store by employee.



1919 Mead St



○ - 10" Planters w/curbside



1919 Mead St Lower
Existing Signage
WOOD

Shelving X

Lights window window Flower pot EXIT Front Door Flower pot window window Lights

HAND Sanitizer
Fire Extinguisher

FIRST AID KIT

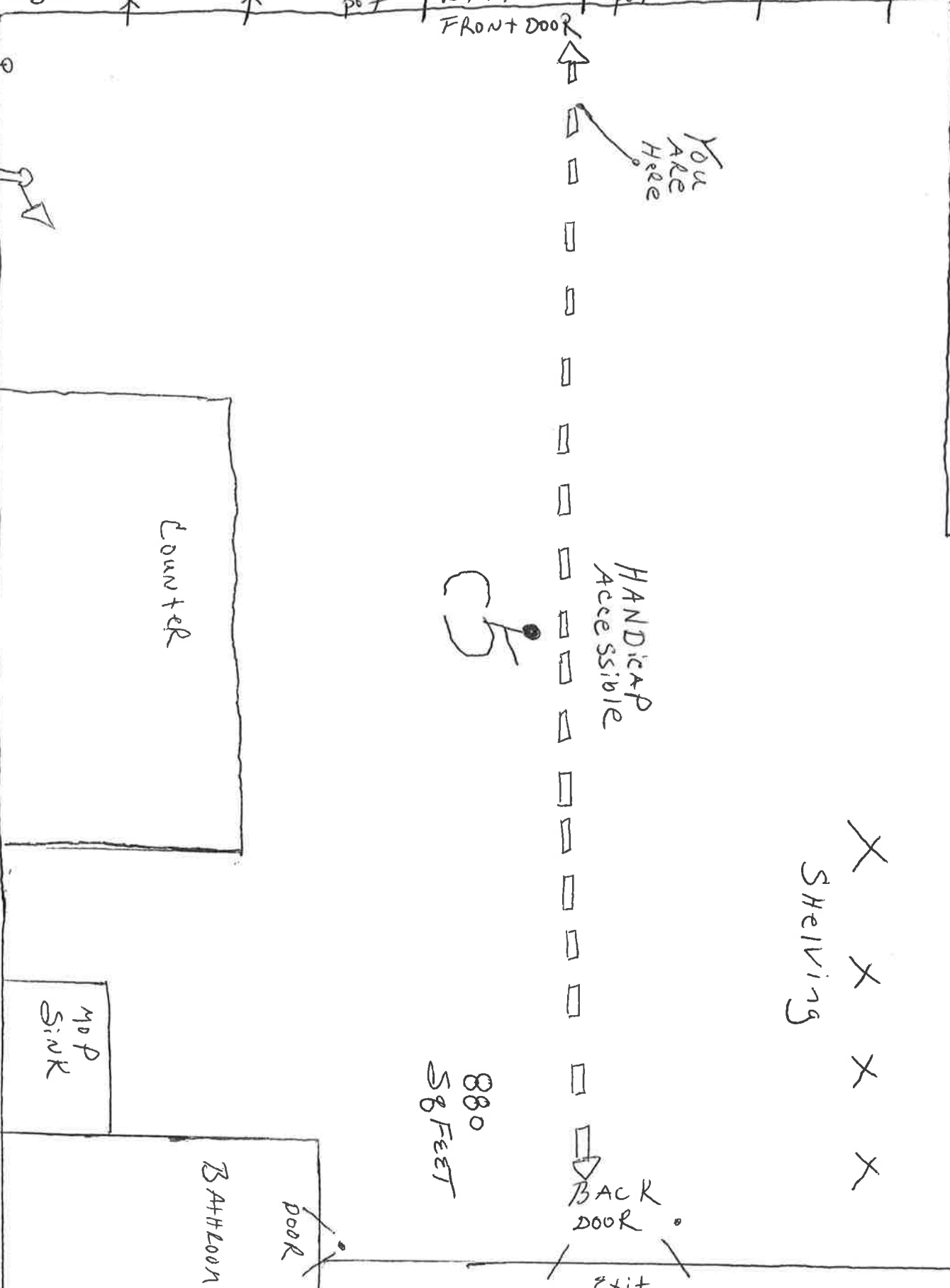
FIRST AID DOOR

Window

You are Here

Exit

HANDICAP



LOOK AS

door Bathroom

SHelving X X X X

880 58 FEET

BACK DOOR

exit

Counter

SINK

BATHROOM

door