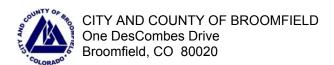
PROJECT CASE NO



This form is intended to be used along with additional

Application for Development Review

information applicable to the particular request. DATE OF SUBMITTAL **PLEASE TYPE** PROJECT NAME 4. TYPE OF REQUEST 1. Applicant: ___ Conceptual Review Person to Contact: Master Plan Amendment Address: PUD- PUD Plan PUD – PUD Plan Amendment.) Telephone: _____ __ Rezoning Fax Number: ___ ROW Easement Vacation E-Mail: 2. Property Owner: _____ ___ Sign Code Exception Person to Contact: ___ Site Development Plan ____ Site Development Plan Amendment – Hearing Address: Site Development Plan - Admin. Modification ___ Subdivision - Final Plat Telephone: ___ Subdivision – Minor Fax Number: ___ Subdivision – Preliminary Plat E-Mail: ___ Subdivision – Replat 3. Planner/Architect/Engineer: ___ Urban Renewal Plan Person to Contact: ___ Use by Special Review Address: _____ Vesting Rights Other Telephone: Fax Number: E-Mail: 5. Property Address and General Location: 6. Legal Description (attach on disk Word 6.0 if longer than one page) 7. Area of Property: _____Acres/Square Feet 8. Current Zoning: 9. Current Land Use: _____ 10. Proposed Zoning: _____ 11. Summary of Proposal: Estimated Project Valuation for land: \$_____ and new construction 12. As owner of the aforementioned property, I hereby consent to the submission of this APPLICATION FOR DEVELOPMENT REVIEW and authorize the applicant to act on my behalf with regard to this application. 12. By STATE OF) ss. **COUNTY OF** The foregoing instrument was acknowledged before me this day of , 20 , by . Witness my hand and official seal. Notary Public Address My Commission expires