

DEVELOPMENT APPLICATION

Received Date:			(Case No:								
15-Day Review:				Base Fee:								
Publish Date:												
Planning Date:				Escrow Amt: Pd								
Council Date:			Ι	ate F	iled:_						-	
Please read carefully and answer current on all fees, licenses, fines, development application accepte accepted after validation by City stees/deposits.	taxes, o d for rev	r ass view l	essmen by the C	ts in ity. C	ordei Inly c	to ha	ve a ete ap	comp plica	lete itions	will		
Type of Request(s): Zoning Site and Building Pla Comprehensive Plan Zoning Text Amendr Rezoning (Map Ame Minor/Major Varian Conditional Use Perr PUD Concept Plan/A PUD Rezoning Concept Plan Review Address of Subject Property:	ment ndment) ce/Appea nit mendme	al nt			Mino Preli Fina Subo Othe	livisior	/ Plat i Grad	ing Pl	an			
Name of Business: Legal Description of Property (attac												
Lot				BlockPlat#								
Subdivision			PI	D#								
): A1	A2	PI R1-A	D# R1	R2	R3	R4	R5	R6			
Subdivision): A1 RMH	A2 B2	PI R1-A B2-A	D# R1 B3	R2 B4	R3		R5				
Subdivision Current Zoning Classification (circle Owner: Name (Print) Address City): A1 RMH	A2 B2	R1-A B2-A ate	R1 B3	R2 B4	R3 BW	R4 I1	R5 I2	R6 P/I	R7	R8	
Subdivision Current Zoning Classification (circle Owner: Name (Print) Address): A1 RMH	A2 B2 Sta(B	R1-A B2-A ateusiness)	R1 B3	R2 B4	R3 BW	R4 I1	R5 I2 iip Fax) _	R6 P/I	R7	R8	
Current Zoning Classification (circle Owner: Name (Print) Address City Telephone (Home) Cell Phone Applicant (If other than the owner): Address Address Address	RMH	B2Sta(B Addre	R1-A B2-A ateusiness)	R1 B3	R2 B4	R3	R4 I1	R5 I2 ip Fax) _	R6 P/I	R7	R8	
Current Zoning Classification (circle Owner: Name (Print) Address City Telephone (Home) Cell Phone Applicant (If other than the owner): Owner: Name (Print)): A1 RMH	B2Sta(B Addre	R1-A B2-A ate usiness) ss	R1 B3	R2 B4	R3 BW	R4 I1	R5 I2 ip Fax) _	R6 P/I	R7	R8	

Cell Phone	Email Address	
Description of Request	(s):	
including, but not limited or eliminate the impacts	POSED USE: List impacts the proposed use vd to traffic, noise, light, smoke/odor, parking, and :	d describe the steps taken to mitigate
Reason Why Request S	hould Be Granted:	
Existing Use of the Prop	perty / Nature of Facility or Business:	
If a request for planni sought, please describe	ng/zoning action on the subject site or any	part thereof has been previously
What?		
When?		
Project Name, if applica	able:	
Are taxes for the prope	rty paid to date?	
nereby apply for the above compliance with City Ordin	consideration and declare that the information an nance and Policy Requirements and are complete a	d materials submitted with this application are and accurate to the best of my knowledge.
	ation will be processed for the next available mo other data is needed and after completion of a stafj	
sponsibility of the property plicant, the property owner	ncurred professional fees and expenses associate y owner and/or applicant and should be prompt acknowledges and agrees to be responsible for the state of the property. If the property fee owner is not the make application.	ly paid. If payment is not received from the he unpaid fee balance either by direct paymen
Signature(s) of Owner('s):	Date:
		Date:
	d by the Planning Commission on: d by the City Council on:	Date: Date:
<u>Distribution</u>		
City Planner:	Building Official: Finance Dir City Clerk	