

DETAILED DEVELOPMENT PLAN APPLICATION



Please Print or Type

Date of Application: _____

Type of Application (Please check one): " **Original Detailed Development Plan**
" **Revision of Detailed Development Plan**
" **Revocation of Detailed Development Plan**

PROPERTY INFORMATION

Name of Development: _____

Location of Development: _____

Property Zoning: _____

General Development Plan (Binding Elements)? Yes " No"

Type of Development (Please check one): " Planned Unit Development (PUD)
" Mobile Home Park (MHP)
" Group Housing (more than 12 units)
" Townhouses (more than 12 units)
" Condominiums (Horizontal Property)
" Multi-Family (more than 12 units)
" Commercial (more than 30,000 sq. ft.)
" Industrial (more than 75,000 sq. ft.)

PROPERTY OWNER/DEVELOPER INFORMATION

Property Owner Information:

Name: _____
Mailing Address: _____
Telephone Number: _____

Developer Information:

Name: _____
Mailing Address: _____
Telephone Number: _____

Surveyor Information:

Name: _____
Mailing Address: _____
Telephone Number: _____

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Engineer Information

Name: _____
Mailing Address: _____
Telephone Number: _____

Architect Information:

Name: _____
Mailing Address: _____
Telephone Number: _____

Landscape Architect Information:

Name: _____
Mailing Address: _____
Telephone Number: _____

ATTACHMENTS

The following items are attached (please check the appropriate categories):

1. _____ Five (5) full sets of Detailed Development Plans
2. _____ Five (5) sets of Topographic Survey/Drainage Plan & Calculations
3. _____ Letter from all Utility Companies anticipated to serve development
4. _____ Letter from City/County/State Engineer (applicable jurisdiction)
5. _____ Two (2) sets of Architectural Plans, if applicable, Elevations of building
6. _____ Two (2) Draft of Proposed Property Owners Association Covenants, Master Deed or Restrictions, if applicable
7. _____ Five (5) Market Study or Traffic Study, if applicable
8. _____ Five (5) copies of Landscape Plan, if applicable
9. _____ Two (2) 11" x 17" size copies Site Plan and Elevations of building (for mailing)
10. _____ Attach completed Checklist.

Amount of Fees: \$ _____

Date of Payment: _____

SIGNATURES

Signature of Owner(s)

Date

