



## LAND DEVELOPMENT APPLICATION

APPLICANT \_\_\_\_\_ TELEPHONE \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_  
(Street) (City) (State) (Zip)

PROPERTY OWNER \_\_\_\_\_ TELEPHONE \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_  
(Street) (City) (State) (Zip)

REQUEST FOR:

- |   |  |
|---|--|
| <input type="checkbox"/> Comprehensive Plan Amendment     | <input type="checkbox"/> Conditional Use           |
| <input type="checkbox"/> Site/Architectural Plan Approval | <input type="checkbox"/> Annexation Request        |
| <input type="checkbox"/> Subdivision Plat or CSM Review   | <input type="checkbox"/> Variance/Board of Appeals |
| <input type="checkbox"/> Zoning District Change           | <input type="checkbox"/> Other                     |

STATUS OF APPLICANT:       Owner       Agent       Buyer       Other

PROJECT LOCATION \_\_\_\_\_ TYPE OF STRUCTURE \_\_\_\_\_

PRESENT ZONING \_\_\_\_\_ REQUESTED ZONING \_\_\_\_\_

PROPOSED LAND USE \_\_\_\_\_

PARCEL # \_\_\_\_\_ ACREAGE \_\_\_\_\_

LEGAL DESCRIPTION \_\_\_\_\_

**NOTE: Attach a one-page written description of your proposal or request.**

The undersigned certifies that he/she has familiarized himself/herself with the state and local codes and procedures pertaining to this application. The undersigned further hereby certifies that the information contained in this application is true and correct.

Signed \_\_\_\_\_ Date \_\_\_\_\_  
(Property Owner)

Fee Required

- \$ 350 Comprehensive Plan Amendment
- \$ t/b/d Site/Architectural Plan Approval (Listed in Sec 1-2-1)
- \$ t/b/d CSM Review (\$10 lot/\$30 min)
- Subdivision Plat (fee to be determined)
- \$ 350 Zoning District Change
- \$ 350 Conditional Use
- \$ t/b/d Annexation Request (State Processing Fees Apply)
- \$ 350 Variance/Board of Appeals
- \$ t/b/d Other

Schedule

- Application Submittal Date \_\_\_\_\_
- Date Fee(s) Paid \_\_\_\_\_
- Plan(s) Submittal Date \_\_\_\_\_
- Plan Comm Appearance \_\_\_\_\_

\$ \_\_\_\_\_ TOTAL FEE PAID      APPLICATION, PLANS & FEE RECEIVED BY \_\_\_\_\_