

URBAN GROWTH DESIGN REVIEW BOARD - OVERLAY DEVELOPMENT PLAN APPLICATION



Please Print or Type

Date of Application: _____

Type of Application (Please check one): Original Design Review Board Overlay Development Plan
 Revision of Design Review Board Overlay Development Plan
 Revocation of Design Review Board Overlay Development Plan

PROPERTY INFORMATION

Name of Development: _____

Location of Development: _____

Property Zoning: _____

General Development Plan (Binding Elements)? Yes No

Type of Urban Development (Please check one): Planned Unit Development (PUD)
 Group Housing Townhouses
 Condominiums Multi-Family
 Commercial Industrial

PROPERTY OWNER/DEVELOPER INFORMATION:

Property Owner Information:

Name: _____

Mailing Address: _____

Telephone Number: _____ Facsimile Number: _____

Business entity - names of Officers, Directors; Shareholders or Members:

Developer Information:

Name: _____

Mailing Address: _____

Telephone Number: _____ Facsimile Number: _____

Surveyor Information:

Name: _____

Mailing Address: _____

Telephone Number: _____ Facsimile Number: _____

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Engineer Information

Name: _____
Mailing Address: _____
Telephone Number: _____ Facsimile Number: _____

Architect Information:

Name: _____
Mailing Address: _____
Telephone Number: _____ Facsimile Number: _____

Landscape Architect Information:

Name: _____
Mailing Address: _____
Telephone Number: _____ Facsimile Number: _____

ATTACHMENTS

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

1. _____ Three (3) full sets of Design Review Overlay Development Plans*
2. _____ Two (2) sets of Architectural Plans, if applicable, Elevations of building
3. _____ Two (2) Draft of Proposed Property Owners Association Covenants, Master Deed or Restrictions, if applicable
4. _____ Two (2) copies of Final Landscape Plan
5. _____ Two (2) 11" x 17" size copies Site Plan and Elevations of building (for mailing)

** After staff review, four (4) full size sets and one 11 x 17 set of the final plan, with the required changes must be submitted for distribution. If the complexity of the plan is such that legibility requires a full size set, seven (7) additional full size sets may be required for distribution to the Board for the public hearing.*

Amount of Fees: \$ _____ Date Filed: _____ Docket Number: _____

SIGNATURES

Signature of Owner(s)	Date
_____	_____
_____	_____