



## **PLANNING COMMISSION PLANNED DEVELOPMENT APPLICATION – FORM 1** PLANNING COMMISSION WORKSHOP

Please complete in ink and return to the Planning and Codes Administration Department with required attachments and information. Planning Commission Workshop applications require a current survey of the property, a concept plan, and a designation of agent if owner is not the applicant. **Both sides of this application must be completed; incomplete applications will not be accepted.** 

| File no.: R | PIN: | Date submitted: | Planning Commission meeting date: |  |
|-------------|------|-----------------|-----------------------------------|--|
|             |      | / /             | / /                               |  |
|             |      |                 |                                   |  |

| OWNER(S) INFORMATION |           |        |              |          |
|----------------------|-----------|--------|--------------|----------|
| Last name: Firs      | t: Middle | 2:     | Interest     |          |
|                      |           |        | □ Sole owner | Co-owner |
| Mailing address:     | City:     | State: | ZIP Code:    |          |
| Daytime phone no.:   | Fax no.:  |        | E-mail:      |          |
| ( )                  | ( )       |        |              |          |

|   | APPLICANT INFORMATIO | DN      |           |
|---|----------------------|---------|-----------|
| To be completed only if Owner is not Applicant: |                      |         |           |
| Applicant's last name:                          | First:               | Middle: |           |
| Mailing address:                                | City:                | State:  | ZIP Code: |
| Daytime phone no.:                              | Fax no.:             |         | E-mail:   |
| ( )   | ( )                  |         |           |

| PROPERTY INFORMATION |                      |                |                          |  |
|----------------------|----------------------|----------------|--------------------------|--|
| Property address:    | Property dimensions: | Property area: | Current zoning district: |  |
|                      |                      | acres          |                          |  |

## **DESIGNATION OF AGENT**

To be completed by Owner(s) only if Owner is not Applicant. All owners must sign.

I (we) hereby appoint the person named as Applicant as my (our) agent to represent me (us) in this request for a planned development rezoning. By signing below, I (we) understand that the planned development application consists of three (3) separate forms and my (our) agent may represent me (us) in all three phases of the application process. I (we) certify that all information in this request is correct.

| Owner name                            | Owner signature        | Date |  |
|---------------------------------------|------------------------|------|--|
| Owner name                            | Owner signature        | Date |  |
| To be completed by Applicant:         |                        |      |  |
| I certify that the information in thi | is request is correct. |      |  |
| Applicant name                        | Applicant signature    | Date |  |

## **REQUIRED INFORMATION**

Please provide a description for the proposed planned development. The description should be of sufficient detail to describe the proposal and be accompanied by a concept plan that illustrates the proposed development. Attach additional pages as needed.