

Application for Review

Date Submitted

Name of Project:			
Address (If no address, location):			
Applicant information: Name:		Owner information: Name:	
Company Name:		Company Name:	
Address:		Address:	
Phone:		Phone:	
IMPORTANT: A DIGITAL copy must be submitted with this application (JPG and/or PDF) along with 4 full-size (one of which must be in COLOR) and 7 reduced copies unless waived by the department. The reduced set of copies should only include the project location map showing a ½ mile radius, a COLORED landscape plan, COLORED building elevations, and exterior light fixture cut sheets.			
	Type of review		<u>Fee</u>
	Rezoning: Attach <u>COPY</u> of rezoning petition <u>along with fee.</u> submitted to City Clerk.	Original must be	\$350
	Certified Survey Map		\$150 + \$50/lot
	Plat Review - Plat Reviews are held until next meeting. 9 copyou must also submit 4 to the County and 2 to State. ** Site Plan & Arch. Review -		☐ prelim.: \$500 + \$10/lot ☐ final: \$300 + \$10/lot ☐ prelim.: \$300 + \$15/1000 sq.ft. or res. unit
	Architectural changes do not need preliminary review. ** Conditional Use with Site Plan	(Check appropriate box) (Check appropriate box)	☐ final: \$200 + \$10/1000 sq.ft. or res. unit ☐ prelim.: \$300 + \$15/1000 sq.ft. or res. unit
	Conditional Use (No Site Plan)	, , ,	☐ final : \$200 + \$10/1000 sq.ft. or res. unit \$200
	** Airport Hangar Review		\$300
	Home Industry (Attach info sheet.)		\$100
	House Move		\$150
	Street Vacation		\$150
	Other (specify):		\$100
	** PUD Review		\$400 added to S.P.A.R. fee
	PUD Amendment		\$100
	Annexations and/or Attachments - Original must be submit	ted to City Clerk.	No Fee
	Resubmittal		\$150
** Please attach to this form a Review Checklist if it involves an architectural and/or site plan review.			
DEADLINE FOR THE SUBMITTAL IS THE MONDAY FOUR WEEKS BEFORE THE MEETING BY 4:00 P.M.			
INTERNAL USE ONLY			
Ar	nount Due: Check #:	Amount Paid:	Rec'd By: