

Name of Project:

Application for Review

Address (If no address, location):		
Project Description:		_
Applicant information: Name:	Owner information: Name:	
Company Name:	Company Name:	
Address:	Address:	
Phone:	Phone:	
E-mail:	E-mail:	

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.

<u>Type of review</u>	<u>Fee</u>
Rezoning: Attach <u>COPY</u> of rezoning petition <u>along with fee</u> . Original musubmitted to City Clerk.	ust be \$350
Certified Survey Map	\$150 + \$50/lot
Plat Review - Plat Reviews are held until next meeting. 9 copies must be You must also submit 4 to the County and 2 to State. (Check	e submitted. prelim.: \$500 + \$10/lot appropriate box) final: \$300 + \$10/lot
** Site Plan & Arch. Review -	□ prelim.: \$300 + \$15/1000 sq.ft. or res. unit
Architectural changes do not need preliminary review. (Check	k appropriate box) 🔲 final: \$200 + \$10/1000 sq.ft. or res. unit
** Conditional Use with Site Plan (Chec	k appropriate box) final: \$200 + \$15/1000 sq.ft. or res. unit final: \$200 + \$10/1000 sq.ft. or res. unit
Conditional Use (No Site Plan)	\$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 submitted 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					
Amount Due:	Check #:	Amount Paid:	Rec'd By:		