

FOR INTERNAL USE: Date received:	
Receipt:	

Ac	ction Requested By:					
Nε	ame of Property Owner					
		(w)				
	ddress of Property Owner					
Na	ame of Applicant (if different)					
Ad	ldress	Phone				
	Property Involved:					
Ad	Idress					
	gal Description					
Pr	operty Identification Number (PIN)					
Pr	resent Use of Property (check one):					
	Single Family Dwelling	■ Business/Commercial				
	Duplex/Two Family Dwelling	☐ Government/Institutional				
	Multi Family Complex	☐ Vacant Land				
Ac	ction Requested (NON-REFUNDABLE):					
	Variance (\$500.00)	☐ Lot Split (\$250.00)				
	Conditional Use Permit (\$500.00)	☐ Site Plan Review (\$100.00)				
	Rezoning, Zoning Amendment (\$500.00)	Subdivision (Fee on request)				
	Comprehensive Plan Amendment (\$550.00)	Other (Please Specify)				
cor app Cre	e above Application Fees do not include any additional nsulting and additional City services. Applicants should plicable ordinances, required attachments, timelines and edit card charges will incur a 3.1% + \$0.30 convenience rief Summary of Request (applicant may sufficient summary	meet with City Staff prior to submitting application to d d fees. e fee.				
l c	eertify that all statements on this application	n are true and correct:				
Si	gnature of Property Owner (required)	Signature of Applicant (if applicable)				
Date:		Date:				
F	Planning Commission meeting: City Co	ouncil meeting: Approved Denie	ed			