



**APPLICATION FORM**

**FOR OFFICE USE ONLY – DO NOT WRITE IN THIS SPACE**

Application No: \_\_\_\_\_

Case Reviewer: \_\_\_\_\_

Planning Director Review  APC Review:  APC Hearing:

APC Meeting/Hearing Date: \_\_\_\_\_

**APPLICATION TYPE**

- |  |   |
|--|---|
| <input type="checkbox"/> Certification of Nonconforming Use        | <input type="checkbox"/> Departure from Design and/or Landscaping Standards         |
| <input type="checkbox"/> Revision of Certified Nonconforming Use   | <input type="checkbox"/> Departure from Parking and/or Loading Spaces               |
| <input type="checkbox"/> Minor Change to Special Exception         | <input type="checkbox"/> Departure from Sign Design Standards                       |
| <input type="checkbox"/> Limited Minor Change to Special Exception | <input type="checkbox"/> Specific Change to Special Exception Site Plan             |
|  | <input type="checkbox"/> Gas Station <input type="checkbox"/> Drive-in or Fast Food |
|  | Other _____   |

**PROPERTY DESCRIPTION**

Property Address, if applicable:		
Geographic Location of Property:		
Existing Use of Property:		Proposed Use:
Total Area/SF:	City Council District:	No. of dwelling units:
Current Zone:	Existing Lots/Blocks/Parcels:	

Please list and provide copies of resolutions of previously approved applications affecting the subject property.

Owner's Name, Address, Phone & E-mail	Owner's Representative, Address, Phone & E-mail: (if applicable)
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**SIGNATURE**

***Signature by all owners of record.***

\_\_\_\_\_  
*Owner's Signature* *Date*

\_\_\_\_\_  
*Owner's Signature* *Date*