



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

- ___ Certification of Nonconforming Use
- ___ Revision of Certified Nonconforming Use
- ___ Minor Change to Special Exception
- ___ Limited Minor Change to Special Exception

- ___ Departure from Design and/or Landscaping Standards
- ___ Departure from Parking and/or Loading Spaces
- ___ Departure from Sign Design Standards
- ___ Specific Change to Special Exception Site Plan
 - Gas Station 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