

Land Use Application

Project Information		
Project Title:		
Brief Description:		
Estimated Construction Value:		
Property Information		
Address:		
Assessor's Map/Tax Lot Number:		
Applicant/Primary Contact		
Name:	Company Name:	
Address:		
City:	State:	ZIP:
Phone:	Email:	
As the person responsible for this application, I hereby acknowledge that I have read this application and state that the information in and included with this application in its entirety is correct. I agree to comply with all applicable City and		
County ordinances and State laws regarding building construction and land use.		
Applicant's Signature:		Date:
Property Owner		
Name:		
Address:		
City:	State:	ZIP:
Phone:	Email:	
Letter of authorization is required if not signed by owner.		
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Property Owner's Signature:		Date:
LAND USE APPLICATION TYPE:		
☐ Annexation (ANN)	☐ Conditional Use (CUP)	☐ Minor Architectural Review (MAR)
☐ Architectural Review (AR)	☐ Historic Landmark (HIST)	☐ Minor Variance (MVAR)
☐ Architectural Review—Single	☐ Industrial Master Plan (IMP)	☐ Sign (SIGN)
Family (ARSF)	☐ Plan Map Amendment (PMA)	☐ Sign Variance (SVAR)
☐ Architectural Review—ADU (ARADU)	☐ Plan Text Amendment (PTA)	□ Variance (VAR)
(ARADO)	☐ Tree Removal Permit (TCP)	☐ Other
Office Use		
Case No:	Date Received:	Received by:
Fee:	Receipt No:	