DEVELOPMENT REVIEW APPLICATION

Type of Application (specify): ____________________________________________

Name or Title of Proposed Project: ________________________________________

Narrative/Description: ____________________________________________________

_______________________________________________________________________

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_______________________________________________________________________

Was a Pre-Application Held? □ YES/NO □

Pre-Application Meeting Date: ______________________________

Is there Previous Project Information? □ YES/NO □

Previous Project Number if applicable: ________________________________

Previous Project Name if applicable: _________________________________

Parcel Control Number(s)

________________________________________

________________________________________

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________________________________________
## PROPERTY OWNER INFORMATION

**Owner (Name or Company):** __________________________________________________________

Company
Representative: ________________________________________________________________

Address: _______________________________________________________________________

City: ______________ State: __________ Zip: __________

Phone: ___________________________ Email: _________________________________

This application will not be considered complete without the notarized signature of all property owners of record, which shall serve as an acknowledgement of the submittal of this application for approval. The property owner’s signature below shall also serve as authorization for the above applicant or agent to act on behalf of said property owner.

## PROJECT PROFESSIONALS

**Applicant (Name or Company):** _________________________________________________

Company Representative: __________________________________________________________

Address: _______________________________________________________________________

City: ______________ State: __________ Zip: __________

Phone: ___________________________ Email: _________________________________

**Agent (Name or Company):** ___________________________________________________

Company Representative: __________________________________________________________

Address: _______________________________________________________________________

City: ______________ State: __________ Zip: __________

Phone: ___________________________ Email: _________________________________

**Contract Purchaser (Name or Company):** _________________________________________

Company Representative: __________________________________________________________

Address: _______________________________________________________________________

City: ______________ State: __________ Zip: __________

Phone: ___________________________ Email: _________________________________

**Land Planner (Name or Company):** _____________________________________________

Company Representative: __________________________________________________________

Address: _______________________________________________________________________

City: ______________ State: __________ Zip: __________

Phone: ___________________________ Email: _________________________________
<table>
<thead>
<tr>
<th>Role</th>
<th>Company Representative</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>Phone</th>
<th>Email</th>
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</thead>
<tbody>
<tr>
<td>Landscape Architect (Name or Company):</td>
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<td>Surveyor (Name or Company):</td>
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<td>Civil Engineer (Name or Company):</td>
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</tbody>
</table>
Traffic Engineer (Name or Company):

Company Representative:

Address:

City: ____________________________, State: _________ Zip: ______________

Phone: __________________________ Email: __________________________

Architect (Name or Company):

Company Representative:

Address:

City: ____________________________, State: _________ Zip: ______________

Phone: __________________________ Email: __________________________

Attorney (Name or Company):

Company Representative:

Address:

City: ____________________________, State: _________ Zip: ______________

Phone: __________________________ Email: __________________________

Environmental Planner (Name or Company):

Company Representative:

Address:

City: ____________________________, State: _________ Zip: ______________

Phone: __________________________ Email: __________________________

Other Professional (Name or Company):

Company Representative:

Address:

City: ____________________________, State: _________ Zip: ______________

Phone: __________________________ Email: __________________________
APPLICANT or AGENT CERTIFICATION

I have read this application, and to the extent that I participated in the application, I have answered each item fully and accurately.

Applicant Signature ___________________________ Date __________

Printed Name ___________________________

NOTARY ACKNOWLEDGMENT

STATE OF: ___________________________ COUNTY OF: ___________________________

The foregoing instrument was sworn to (or affirmed), subscribed, and acknowledged before me by means of ☐ physical presence or ☐ online notarization, this ____ day of ________, ____ (year), by ____________________(name of person making statement), who is personally known to me or has produced ___________________(type of identification) as identification.

_________________________________________ ___________________________
Notary Public Signature Printed name

STATE OF: ___________________________ at-large