



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:	
<i>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.</i>		
Applicant's Signature:		Date:
Property Owner		
Name:		
Address:		
City:	State:	ZIP:
Phone:	Email:	
<i>Letter of authorization is required if not signed by owner.</i>		
Property Owner's Signature:		Date:

LAND USE APPLICATION TYPE:

- | | | |
|--|---|---|
| <input type="checkbox"/> Annexation (ANN)
<input type="checkbox"/> Architectural Review (AR)
<input type="checkbox"/> Architectural Review—Single Family (ARSF)
<input type="checkbox"/> Architectural Review—ADU (ARADU) | <input type="checkbox"/> Conditional Use (CUP)
<input type="checkbox"/> Historic Landmark (HIST)
<input type="checkbox"/> Industrial Master Plan (IMP)
<input type="checkbox"/> Plan Map Amendment (PMA)
<input type="checkbox"/> Plan Text Amendment (PTA)
<input type="checkbox"/> Tree Removal Permit (TCP) | <input type="checkbox"/> Minor Architectural Review (MAR)
<input type="checkbox"/> Minor Variance (MVAR)
<input type="checkbox"/> Sign Variance (SVAR)
<input type="checkbox"/> Variance (VAR)
<input type="checkbox"/> Other _____ |
|--|---|---|

Office Use		
Case No:	Date Received:	Received by:
Fee:	Receipt No:	

