

Development Application

SP# _____

Planned Development: Minor _____ Minimal _____ Major _____
Conceptual _____ Preliminary _____ Final _____
Site Plan: Minor _____ Major _____ Conceptual _____ Final _____
Subdivision: Sketch _____ Preliminary _____ Final _____ Variance: _____ Conditional Use: _____

Property description (address) for application _____

General Information

Applicant _____ Day Phone# _____

Address _____

Owner of Record (attach affidavit if not applicant)

Name _____ Day Phone# _____

Address _____

Applicant's agents

Name _____ Day Phone# _____

Address _____

Property information

Zoning District _____ Current Use _____ Tax Map# _____ Lot# _____ Lot size sf _____

Other Information

Street frontage (public or private) _____ feet Proposed number of stories & height _____

Estimated completion date _____ Landscape cost _____

Proposed Parking Spaces _____ Required spaces _____

Lot coverage (include all structures and impervious surface)

Existing (sq ft.) _____ plus proposed (sq .ft.) _____ equals _____ total sq .ft. divided by _____ lot s.f.
equals _____ percent lot coverage

Submit two (2) full size copies, a PDF copy, GIS and supportive documentation required by the Code and the appropriate completed checklist for initial review by Staff. After Staff determines the application is complete attach two (2) full size copies and eight (8) 18" x 24" copies of your proposal, forty-five (45) days prior to a scheduled meeting. Applications that are not complete cannot be accepted for review.

Briefly describe your proposal (attach separate sheet if necessary) _____

Describe all waiver requests (if applicable) _____

I certify that the information on this application is true and correct. I agree to abide by all the rules and regulations as specified in the land development code and any conditions placed upon approval of this application. In accordance with the *Essex Junction City Council Policy for Funding Engineer Plan Review and Inspections*, the applicant by signing this form agrees to pay for the actual cost of engineering plan review and construction inspections by the City Engineer.

Applicant

Date

Land Owner (if different)

Date

Staff Action

Date received _____

Meeting date: _____

Commission /Board Action Approved _____ Denied _____ Date: _____

Other approvals /conditions _____

**** Fee based on s.f. of improved area per current Fee Schedule**

Staff Signature

Date

Fee Amount _____ **

Fee Verified _____
