

Application for CPOD Design Review

APPLICANT INFORMATION

Name of Applicant: _____

Mailing Address: _____

Phone: _____ Email: _____

Property Owner(s) _____

Mailing Address: _____

Phone: _____ Email: _____

Project Engineer/Architect: _____

Address: _____

Phone: _____ Email: _____

PROJECT INFORMATION

Location of Project: _____

Existing Use of Property: _____ Current Zoning: _____

Proposed Use of Property: _____ Acreage: _____

Type of Activity: New Construction _____ Exterior Renovation _____ Sign _____

Est. Project Cost: _____ Est. Start Date: _____

Documents to be included with application (1 original and 1 electronic):

- Building elevations *of all elevations new and/or altered*
- Color samples
- Photos of adjacent structures
- Signage and/or lighting
- List of work to be completed in numerical order
- Letter of Intent describing in detail the scope of work to be performed

Signature of Applicant: _____ Date: _____

APPLICATION FEES

Residential	\$50
Residential accessory >150 sq ft	\$25
Commercial	\$150
Commercial accessory	\$100
Sign	\$50

Fee paid: _____ Received by: _____ Date: _____

PETITIONER MUST BE PRESENT FOR DRC & PC MEETINGS