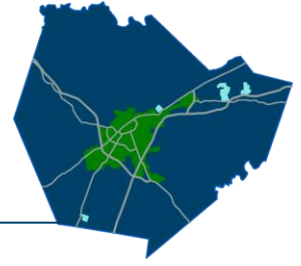


# APPLICATION FOR OVERLAY DEVELOPMENT PLAN

# CCPC

City-County  
Planning Commission  
warrenpc.org



**Docket Number:** \_\_\_\_\_  
**Date Application Filed:** \_\_\_\_\_  
**Public Hearing Date:** \_\_\_\_\_  
**Pre-Application Meeting Date:** \_\_\_\_\_

**Application Type:**  
 Original Overlay Development Plan  
 Amendment to Overlay Development Plan  
 Revocation of Overlay Development Plan  
 Sign Only Application

## PROPERTY AND PROPOSED DEVELOPMENT INFORMATION

**Name of Development:** \_\_\_\_\_  
**Location of Development:** \_\_\_\_\_  
**Current Zoning:** \_\_\_\_\_ **Development Plan Conditions:**     YES     NO

## APPLICANT AND DEVELOPER INFORMATION

**1) PROPERTY OWNER(s):** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_  
\_\_\_\_\_  
**Cell Number:** \_\_\_\_\_  
\_\_\_\_\_  
**E-Mail Address:** \_\_\_\_\_

**2) DEVELOPER:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_  
\_\_\_\_\_  
**Cell Number:** \_\_\_\_\_  
\_\_\_\_\_  
**E-Mail Address:** \_\_\_\_\_

**3) SURVEYOR:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_  
\_\_\_\_\_  
**Cell Number:** \_\_\_\_\_  
\_\_\_\_\_  
**E-Mail Address:** \_\_\_\_\_

**4) ENGINEER:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_  
\_\_\_\_\_  
**Cell Number:** \_\_\_\_\_  
\_\_\_\_\_  
**E-Mail Address:** \_\_\_\_\_

**5) ARCHITECT:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Cell Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**6) LANDSCAPE ARCHITECT:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Cell Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**Attachments**

*The following items are attached (please check the appropriate categories):*

- Three (3) full sets of the proposed overlay development plan\*
- Two (2) sets of architectural plans, if applicable, and elevations of building
- Two (2) copies of the draft of proposed property owners' association covenants, master deed or restrictions, if applicable
- Two (2) copies of final landscape plan
- Two (2) 11" x 17" copies of the site plan and elevations of building (for public notification)

*\* After staff review, four (4) full size sets and one 11 x 17 set of the final plan, with the required changes must be submitted for distribution. If the complexity of the plan is such that legibility requires a full size set, seven (7) additional full size sets may be required for distribution to the Board for the public hearing.*

**APPLICANT'S CERTIFICATION**

*I do hereby certify that, to the best of my knowledge and belief, all application materials have been submitted and that the information they contain is true and correct. Please attach additional signature pages if needed.*

Signature of Applicant(s) and Property Owner(s):

Date:

1) \_\_\_\_\_

\_\_\_\_\_

*(please print name and title)*

2) \_\_\_\_\_

\_\_\_\_\_

*(please print name and title)*

*The foregoing signatures constitute all of the owners of the affected property necessary to convey fee title, their attorney, or their legally constituted attorney-in-fact. If the signature is of an attorney, then such signature is certification that the attorney represents each and every owner of the affected property. Please use additional signature pages, if needed.*

**REQUIRED FEES MUST BE PAID BEFORE ANY APPLICATION WILL BE ACCEPTED**

Application Fee: \_\_\_\_\_

Land Use Certificate Fee: \_\_\_\_\_

Date Fees Received: \_\_\_\_\_