

### Administrative Design Review Submittal Checklist

The Administrative Design Review Application is for projects that do not require City Council approval. Staff reviews application to be in substantial conformance with Preliminary Development Plans approved by City Council and/or City Code regulations. Prior to submitting an application, please discuss the proposed changes with a member of the Planning staff to ensure that the administrative review process is the appropriate action.

#### Submitting an application online:

- 1. Go to https://developmentpermits.chandleraz.gov/clics/
- 2. Log in, or register for an account if you are a new user
- 3. Under the "Planning" tab, select "Create an Application", choose the appropriate bullet point
- 4. Continue application and provide all required information, upload all of the required documents listed below and pay the application fee

#### Required electronic documents:

| Subm<br>elevat | it ONE ELECTRONIC COPY of all of the required documents in 8 $\frac{1}{2}$ x 11 or 11 x 17 sheet sizes. All plans and ions must be to scale. Please contact Planning staff at 480-782-3050 for a determination of which of the following nents are applicable to the proposed modifications, and therefore required for administrative design review: |
|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                | Letter of Authorization (only required if the applicant is not the property owner)                                                                                                                                                                                                                                                                    |
|                | Written narrative that describes the proposed modifications, including applicable details such as architecture, site design, landscaping theme/design, parking, building sizes, total building area property size, and housing product                                                                                                                |
|                | Site Plan                                                                                                                                                                                                                                                                                                                                             |
|                | Floor Plan (call out Service Entrance Section (SES) locations)                                                                                                                                                                                                                                                                                        |
|                | Building elevations: one color and one black & white. Identify building materials, paint colors, height and required screening for roof-mounted equipment.                                                                                                                                                                                            |
|                | Roof Plan                                                                                                                                                                                                                                                                                                                                             |
|                | Landscape Plan                                                                                                                                                                                                                                                                                                                                        |
|                | Photographs of existing building/site development                                                                                                                                                                                                                                                                                                     |
|                | Material and color board/exhibit                                                                                                                                                                                                                                                                                                                      |
|                | Other:                                                                                                                                                                                                                                                                                                                                                |
| Subm           | nitting over the counter: (located at 215 E. Buffalo Street, Chandler, AZ 85225)                                                                                                                                                                                                                                                                      |
| 1.<br>2        | Complete the attached application Submit a CD or other electronic storage device (i.e., thumb drive) containing one electronic copy of ALL required                                                                                                                                                                                                   |

- Submit a CD or other electronic storage device (i.e., thumb drive) containing one electronic copy of ALL required items on the checklist above
- 3. Hard copies are optional

\$115 for Minor modifications such as exterior/façade renovations, new canopies, fixtures, color and/or material changes, new outdoor patios and building additions that are less than 10% increase in building area.

Fees:

\$275 for new construction and building additions that are greater than 10% of existing building area



# Administrative Design Review Letter of Authorization

| Please accept an application for Administra                              | tive Design Review for property located a  | at:                      |
|--------------------------------------------------------------------------|--------------------------------------------|--------------------------|
|                                                                          |                                            |                          |
| Assessor Parcel Number(s):                                               |                                            |                          |
|                                                                          |                                            |                          |
| Said property is owned by (provide the Mari                              | icopa County recorded Property Owner in    | nformation):             |
| who hereby authorizes me to file this applica                            | ation on his/her behalf.                   |                          |
| certify that the above information is correct<br>on behalf of the owner. | ct, and that I am authorized to file an ap | oplication on said prope |
|                                                                          | Applicant Signature                        | Date                     |
|                                                                          | Property Owner Name Printed                | <br>Date                 |
|                                                                          | Property Owner Name Printed                | Date                     |
|                                                                          | Property Owner Signature                   | Date                     |
|                                                                          | Property Owner Name Printed                | Date                     |
|                                                                          | Property Owner Signature                   | <br>Date                 |



## **Administrative Design Review Application**

This application is only to be used when submitting over the counter

| Project Name                                          |                        |                |                             |             |  |  |  |  |
|-------------------------------------------------------|------------------------|----------------|-----------------------------|-------------|--|--|--|--|
| Property Location/Address                             |                        |                | City, State, Zip Code       |             |  |  |  |  |
| Review Type (Elevations, Site, Housing Product, etc.) |                        | ÷.)            | Assessor's Parcel Number(s) |             |  |  |  |  |
|                                                       |                        |                | Gross Acreage               | Net Acreage |  |  |  |  |
| Property Owner(s)                                     |                        |                | Contact Person              |             |  |  |  |  |
| Mailing Address                                       |                        |                | Phone Number                |             |  |  |  |  |
| City, State, Zip Code                                 |                        |                | Email Address / Fax Number  |             |  |  |  |  |
| Applicant/Firm Name                                   |                        | Contact Person |                             |             |  |  |  |  |
| Mailing Address                                       |                        | Phone Number   |                             |             |  |  |  |  |
| City, State, Zip Code                                 |                        |                | Email Address / Fax Number  |             |  |  |  |  |
| Applicant's Signature                                 |                        |                | Date                        |             |  |  |  |  |
| For City Use                                          |                        |                |                             |             |  |  |  |  |
| Date Filed                                            | Application No.<br>PLA | Planner        |                             |             |  |  |  |  |

Form No: UDM-049/ **Development Services**