

The Administrative Review Application and process is for projects that have gone through the formal zoning process and received approval by City Council. The review is for modifications of an approved plan that can be deemed in keeping with substantial conformance with the approved plan. Please note that it is important to discuss with a member of the Planning staff to ensure that the administrative review process is the appropriate action.

Correlating Zoning Case Name			Correlating Zoning Case No.
Property Location/Add	ress		City, State, Zip Code
Review Type (Elevation	ns, Site, Housing Product, etc	2.)	Site Gross Acreage
			Proposed Gross 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
Signature of Property (Owner or Representative		Date
	·		
		For City	Use
Date Filed	Application No. ADM	Planner	

Transportation & Development Department Planning Division 215 E. Buffalo St., Chandler Arizona 85225



Zoning Administrative Review Submittal Checklist

Written narrative that describes the proposed modifications, including specific details such as architecture, site design, landscaping theme/design, parking, building sizes, total building area, property size, housing product Application Letter of Authorization (required if applicant is not the property owner) Depending on type of modification not all of the below will apply. Please work with the assigned Planner Site plan, including Zoning district for subject parcel _ Site Address, Suite Number Date of plan and revisions Vicinity map with notation of site North arrow and scale (engineers scale) Existing street names Existing and ultimate right-of-way dimensions Building configurations/dimensions Gross building area ____ Gross and net acreage Lot coverage Building, landscape and intersection setbacks Parking required and provided **Building Floor Plan** Elevations (one color and one black and white for each plan) Floor Plan for each housing product Plot Plan (one for each elevation) Landscape Plan (color and black and white) Existing/Approved Plan Submitted exhibits will need to be 8 $\frac{1}{2}$ x 11 or 11 x 17. Please work with the assigned Planner.



Please accept an application for a Use Permit for property located at:

Assessor Parcel Number(s):

Said property is owned by (provide the Maricopa County recorded Property Owner information):

who hereby authorizes me to file this application on his/her behalf.

I certify that the above information is correct, and that I am authorized to file an application on said property on behalf of the owner.

Applicant Signature	Date
Property Owner Name Printed	Date
Property Owner Signature	Date
Property Owner Name Printed	Date
Property Owner Signature	Date