

**DEVELOPMENT REVIEW APPLICATION**

**1. Name of Project/Development:**

**2. Property Owner Information:**

Name: \_\_\_\_\_ Email address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**3. Applicant Information:**

Name: \_\_\_\_\_ Email address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**4. Representative Information:**

Name: \_\_\_\_\_ Email address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**5. Legal Description:**

**6. Street Address:**

**7. Project Description:**

**8. Zoning Designation:**

**9. Current Land Use:**

**10. Comprehensive Plan Designation:**

<b>11. Gross Area:</b>	<b>(Acres)</b>	<b>(Square Feet)</b>
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<b>12. Net Area:</b>	<b>(Acres)</b>	<b>(Square Feet)</b>
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<b>13. Will this application require a deviation?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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<p><b>14. Application Type (please check all that apply)</b></p> <p><input type="checkbox"/> Sketch Plan</p> <p><input type="checkbox"/> Site Plan</p> <p><input type="checkbox"/> Conditional Use Permit</p> <p><input type="checkbox"/> Subdivision Pre-Application</p> <p><input type="checkbox"/> Subdivision Preliminary Plat</p> <p><input type="checkbox"/> Subdivision Final Plat</p> <p><input type="checkbox"/> Annexation</p> <p><input type="checkbox"/> Zone Map Amendment</p> <p><input type="checkbox"/> Comprehensive Plan Amendment</p> <p><input type="checkbox"/> Other (describe)</p>
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This application must be accompanied by the appropriate checklist(s), number of plans or plats, adjoiner information and materials, and fee (see Development Review Application Requirements and Fees). The plans or plats must be drawn to scale on paper not smaller than 8½-by 11-inches or larger than 24- by 36-inches **folded into individual sets no larger than 8½- by 14-inches**. The name of the project must be shown on the cover sheet of the plans. If 3-ring binders will be used, they must include a table of contents and tabbed dividers between sections. Application deadlines are Wednesdays at 5:00 pm. This application must be signed by both the applicant(s) and the property owner(s) (if different) before the submittal will be accepted.

As indicated by the signature(s) below, the applicant(s) and property owner(s) submit this application for review under the terms and provisions of the City of Dunn Center development related ordinances. It is further indicated that any work undertaken to complete a development approved by the City of Dunn Center shall be in conformance with the requirements of the Zoning Ordinance and any special conditions established by the approval authority. I acknowledge that the City has an Impact Fee or Hook-Up Fee Program and impact fees may be assessed for my project. Further, I agree to grant City personnel and other review agency representatives access to the subject site during the course of the review process. I (We) hereby certify that the above information is true and correct to the best of my (our) knowledge.

<b>Applicant's Signature:</b>	<b>Date:</b>
<b>Applicant's Signature:</b>	<b>Date:</b>

<b>Property Owner's Signature:</b>	<b>Date:</b>
<b>Property Owner's Signature:</b>	<b>Date:</b>
<b>Property Owner's Signature:</b>	<b>Date:</b>