

City of Garden General Development Plan Application



Development Information

Development Name		
Property Address		
Phased development?		If yes, indicate proposed number of phases:
<input type="checkbox"/> Yes <input type="checkbox"/> No		
Parcel ID	Total Site Acreage	Zoning
Project Description		
Water Supply		Sewage Disposal
<input type="checkbox"/> Public <input type="checkbox"/> Private		<input type="checkbox"/> Public <input type="checkbox"/> Private

Applicant Information

Owner	
Name	Address
Phone	Email
Engineer/Surveyor <input type="checkbox"/> Same as authorized agent <input type="checkbox"/> Check here to receive staff review comments via email	
Company Name	Contact (Individual Name)
Phone	Email
Authorized Agent (Requires Authorized Agent Form) <input type="checkbox"/> Check here to receive staff review comments via email	
Company Name	Contact (Individual Name)
Phone	Email

I understand that I will need to attend or be represented by a duly authorized agent at the meeting of the Planning Commission and that my application cannot be approved unless I am represented.

Print Name _____ Signature _____ Date _____

OFFICE USE ONLY		
Received By	Date Received	Case Number
Submittal Format <input type="checkbox"/> Electronic <input type="checkbox"/> Paper <input type="checkbox"/> Both	Fee Amount Paid	Invoice Number