CITY AND COUNTY OF BROOMFIELD
One DesCombes Drive
Broomfield, CO 80020

Community Development Department
(303) 438-6284

Application for Development Review

This form is intended to be used along with additional Information applicable to the particular request.

PROJECT CASE NO _
DATE OF SUBMITTAL _____
FEE PAID: _____
PROJECT NAME _____

PLEASE TYPE

1. **Applicant/Developer:**
_____
Person to Contact: _____
Address: _____
_____
Telephone: _____
Fax Number: _____
E-Mail: _____

2. **Property Owner (Per Current Title Policy):**
_____
Person to Contact: _____
Address: _____
_____
Telephone: _____
Fax Number: _____
E-Mail: _____

3. **Planner/Architect/Engineer:**
_____
Person to Contact: _____
Address: _____
_____
Telephone: _____
Fax Number: _____
E-Mail: _____

TYPE OF REQUEST

___ Administrative (Eligible Minor Variance – no fee)
___ Administrative (Minor SDP Mod. or Eligible Wireless)
___ Appeals and Variances
___ Conceptual Review
___ Comprehensive Plan Amendment
___ Planned Unit Development - Plan
___ Planned Unit Development - PUD Plan Amendment
___ Rezoning
___ ROW / Easement Vacation, Easement Grant
___ Sign Code Exception

___ Site Development Plan – Plan with Agreement*
___ Site Development Plan – Plan Amendment

___ Subdivision - Final Plat with Agreement*
___ Subdivision – Preliminary Plat
___ Subdivision – Minor Plat
___ Subdivision – Replat
___ Use by Special Review (Various)
___ Urban Renewal Site Plan
___ Vesting Rights
___ Other

*Please consult the Owner/Developer Information Form regarding (Subdivision) Improvement Agreements.

4. Property Address and General Location: _____
_____
5. Legal Description (attach on disk Word 6.0 if longer than one page) _____
_____
_____
6. Area of Property: _____Acres/Square Feet
7. Current Zoning: _____
8. Current Land Use: _____
9. Proposed Zoning: _____
10. Summary of Proposal:_____
_____
11. Estimated Project Valuation for land: $_____ and new construction $_____

As owner of the aforementioned property, I hereby consent to the submission of this Application for Development Review and authorize the applicant to act on my behalf with regard to this application.

12. Owner _____
Please Print

Signature _____

STATE OF)
) ss.
COUNTY OF)

The foregoing instrument was acknowledged before me this _____ day of _____, 20_____,

by_____.

Witness my hand and official seal.

_____
Notary Public

_____
Address

My Commission expires _____.

Rev. 2012