

Technology Overlay Review Request

- | | | |
|--|---|----------------------------------|
| <input type="checkbox"/> BUILDING PERMIT - NEW CONSTRUCTION | <input type="checkbox"/> BUILDING PERMIT - GRADING PLAN | <input type="checkbox"/> SIGNAGE |
| <input type="checkbox"/> BUILDING PERMIT - EXPANSION OR RENOVATION | <input type="checkbox"/> REZONING | |

APPLICANT NAME *- no individuals on behalf of -*

DATE FILED

FILE NUMBER

CORRESPONDENCE

All correspondence will be directed to the approved contact listed below. The contact information you provide here and elsewhere on this form will be included in the application materials and is part of the public record of your case.

- ☐ APPLICANT ☐ OWNER ☐ OPTION HOLDER ☐ SURVEYOR ☐ ENGINEER ☐ ARCHITECT/LANDSCAPE ARCHITECT ☐ ATTORNEY

NAME

COMPANY

ADDRESS

CITY

STATE

ZIP

PHONE

EMAIL

CURRENT PROPERTY INFO

- ☐ MULTIPLE OWNERS / OPTION HOLDERS

OWNER NAME *- if different -*

OWNER ADDRESS

OWNER PHONE/EMAIL

PROPERTY ADDRESS

PARCEL ID(S)

PART OF PARCEL? (Y/N)

TRACT SIZE

STAFF USE ONLY

- ☐ CITY ☐ COUNTY

GENERAL LOCATION

DISTRICT

ZONING

**LAND USE CLASSIFICATION (CITY) /
PLACE TYPE (COUNTY)**

PLANNING SECTOR

EXISTING LAND USE

REQUEST

BUILDING PERMIT

- ☐ NEW CONSTRUCTION
☐ EXPANSION OR RENOVATION
☐ GRADING PLAN

- ☐ REZONING
☐ SIGNAGE

PLAN MATERIALS:

- ☐ DEVELOPMENT PLAN
☐ BUILDING ELEVATIONS
☐ FLOOR PLAN
☐ LANDSCAPE PLAN
☐ SIGNAGE PLAN
☐ OFF-STREET PARKING

☐ OTHER:

WAIVERS OR VARIANCES REQUESTED? ☐ YES ☐ NO

RENOVATION OR EXPANSION

SUMMARY OF WORK TO BE PERFORMED:

ZONING VARIANCE

SUMMARY OF ZONING VARIANCE REQUEST:

REZONING

REZONE FROM: _____

TO: _____

PLAN AMENDMENT FROM: _____

TO: _____

SIGNAGE

- | | | |
|------------------------------------|--|-------------------------------------|
| <input type="checkbox"/> YARD SIGN | <input type="checkbox"/> BUILDING SIGN | <input type="checkbox"/> OTHER SIGN |
| AREA: _____ | AREA: _____ | AREA: _____ |
| HEIGHT: _____ | HEIGHT: _____ | HEIGHT: _____ |
| FINISH: _____ | FINISH: _____ | TYPE: _____ |

STAFF USE ONLY

- ☐ Technology Overlay Checklist
☐ Property Owners/Option Holders

CODE

FEE

CODE

FEE

TOTAL

AUTHORIZATION

By signing below

☐ I declare under penalty of perjury the foregoing is true and correct: 1) He/she/it is the owner of the property AND 2) The application and all associated materials are being submitted with his/her/its consent

APPLICATION AUTHORIZED BY

AFFILIATION

DATE

PHONE NUMBER

EMAIL

STAFF SIGNATURE

PRINT NAME

DATE PAID