

CITY OF MENTOR PLANNING COMMISSION APPLICATION INFORMATION

Please Check Appropriate Box(es)

☐ Preliminary Site Plan (Fee \$300)		☐ Final Site & Architectural Review (Fee \$500)		
☐ Architectural Review/Re-Imaging (Fee \$200)		☐ Building Addition/Site Alteration (Fee \$200)		
☐ Informal Rezoning (Fee \$300)		Rezoning (Fee \$500)		
☐ Preliminary Subdivision (Fee \$300)		☐ Final Subdivision (Fee \$500)		
☐ Development Plan Amendment (Fee \$300)		CUP Amendment or Transfer (Fee \$200)		
☐ Road Vacation (Fee \$100)		☐ Time Extension on Approval (Fee \$100)		
☐ Sidewalk Waiver or Othe	er (Fee \$100) Type:			
PROJECT INFORMATION (Please Print)				
Project Address:		Zoning:		
Parcel Number(s):				
COMPLETE BELOW AS APPLICABLE (Please Print)				
Proposed Use:	Proposed Z	Proposed Zoning Classification:		
Building Area: Lot Acreage:				<u>:</u>
Number of Sublots:	Acreage in Sublots: _	Acreage in Open Space: Total Acreage:		Total Acreage:
Cul-De-Sac Length:	c Length: Sidewalks: ☐ Yes ☐ No			
	NAME AND ADDRESS	OF APPLICANT: (Prin	nt Full Address)	
Company Name:				
Contact Person:				
Street Address:				
City:		State:	Zip (Code:
Phone Number:	none Number:Cell Number:			
Email Address:				
APPLICANT SIGNATURE: DATE:				
NAME AND ADDRESS PROPERTY OWNER: (Authorization required if different than Applicant)				
Company Name:				
Contact Person:				
Street Address:				
City:		State:	Zip (Code:
Phone Number: Cell Number:				
Email Address:				
The undersigned Owner agrees that the above person (Applicant) shall have, for the sole purpose(s) set forth herein, the full authority to act as an agent for the Property Owner and shall be, for all purposes set forth herein, deemed an agent in the direct employment of the above-referenced for the following purposes (provide a complete description of the scope of the agency relationship):and shall have full power and authority to act in the name of the above-referenced, make application(s), receive information and notices, represent, and bind same in any matters falling within the scope of the purpose(s) set forth herein above.				
OWNER SIGNATURE:			DATE:	:
Staff Use Only: ☐ Fee Paid ☐ Notice Sign Given to Applicant				
Received By:	e at r p.m. on the third floor of the	widilicipal Center in Council	Chambers	