



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 Other (Fee \$100) Type: _____

PROJECT INFORMATION (Please Print)

Project Address: _____ Zoning: _____

Parcel Number(s): _____

COMPLETE BELOW AS APPLICABLE (Please Print)

Proposed Use: _____ Proposed Zoning Classification: _____

Building Area: _____ Lot Acreage: _____

Number of Sublots: _____ Acreage in Sublots: _____ Acreage in Open Space: _____ Total Acreage: _____

Cul-De-Sac Length: _____ Sidewalks: Yes No

NAME AND ADDRESS OF APPLICANT: (Print Full Address)

Company Name: _____

Contact Person: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone 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 Meeting Date: _____

Planning Commission meetings are at 7 p.m. on the third floor of the Municipal Center in Council Chambers

Received By: _____

(REVISION 01/2022 ALL OTHER VERSIONS ARE OBSOLETE)

Mentor Municipal Center, 8500 Civic Center Boulevard, Mentor, Ohio 44060-2499 www.cityofmentor.com

Department of Planning and Development \ Phone 440-974-5740 \ Email planning@cityofmentor.com

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THE FOLLOWING ITEMS SHALL BE ADDRESSED AS PART OF THE APPLICATION:

SITE DATA:

- | | |
|--|--|
| _____ Letter Addressing the City Engineer's & Stipulations per the preliminary site plan | _____ Cross-Section & Structural Design of Pavement Including Curb Type. (Including Note for 8" Concrete Apron) |
| _____ Name of Development | _____ Finished Grade of Site by Contour (Including Curbs & Paved Areas and Finished Floor Elevation of all Proposed Buildings) |
| _____ Name & Address of Developer and Owner (If Different) | _____ Traffic impact study done by a Engineer qualified and pre-approved by the City Engineer |
| _____ North Arrow, Date and Number of Sheets | _____ Copy of the permit application or a wetlands delineation affirmation submitted to the U.S. Army Corps of Engineers. |
| _____ Scale 1" = 50' or Larger | _____ Location, Name & Dimensions of all Right-of-Way & Easements |
| _____ Ownership, Use & Zoning of Adjacent Properties | _____ Location & Height of Fences, Walls, or Screening |
| _____ Status of Existing Buildings on Site | _____ Location And Screening of Refuse Pad(s) |
| _____ Proposed Building Set Back(s) | _____ Exterior Lighting Plan |
| _____ Size, Location & Type of Vehicular Ingress & Egress for Site & Existing Drives Adjacent within 50' of the Site | _____ Landscape/Tree Management Plan (Including Plant List, Sizes & Quantities) |
| _____ Size, Location & Type of Pedestrian Access | _____ Location & Type of Buffers |
| _____ Location & Dimensions of all Parking Spaces & Bays, Dock & Loading Spaces | |
| _____ Parking Analysis (Number of Parking Spaces Required/ Provided) | |
| _____ Type of Surface in Parking & Walk Areas Including Curbs | |

Building Data:

- | | |
|---|--|
| _____ Building Elevations Showing Architectural Style & Roof Mounted HVAC Units | _____ Floor Plan |
| _____ Building Height | _____ Building Material List Including Size, Type & Color |
| _____ Number of Floors and Total Area | _____ Building Materials on Sample Board & Color Rendering |

Storm Drainage:

- | | |
|---|--|
| _____ Calculations of Existing & Proposed Storm Runoff in Conformance With Current City Policy (2 Copies) | _____ Location, Size, Type & Grade of All Ditches |
| _____ Location, Type & Size of Catch Basins, Inlets, Pipes & Other Drainage Structures | _____ Erosion Control Methods |
| | _____ Drainage Design Standards of the City Completed (2 Copies) |

UTILITIES:

- | | |
|--|---|
| _____ Location & Size of Existing Facilities | _____ Letter From Appropriate Utility Company (Only Required for Multi-Family, Large Commercial or Industrial Projects or as Requested) |
| _____ Location & Size of Proposed Facilities | |
| _____ Electrical Service Plan | |

NOTES: A total of 19 copies of the plans are required. NO SHEET SHALL EXCEED 42" IN SIZE. 16 Copies can be submitted as 11" x 17" if they are legible. The other three (3) sets are required to be full size. A digital copy of all plans and documents shall also be submitted. This can be either via email (10 MB maximum), DVD, flash drive or other means.

Additional or revised information for tabled agenda items need to be submitted at least ten (10) working days prior to the Municipal Planning Commission meeting.

Questions can be directed to the Department of Planning and Development at (440) 974-5740.

(REVISION 01/2022 ALL OTHER VERSIONS ARE OBSOLETE)

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