CITY OF MENTOR
PLANNING COMMISSION APPLICATION INFORMATION
Please Check Appropriate Box(es)

☐ Preliminary Site Plan (Fee $300)

☐ Architectural Review/Re-Imaging (Fee $200)

☐ Informal Rezoning (Fee $300)

☐ Preliminary Subdivision (Fee $300)

☐ Development Plan Amendment (Fee $300)

☐ Road Vacation (Fee $100)

☐ Sidewalk Waiver or Other (Fee $100) Type: _____

☐ Final Site & Architectural Review (Fee $500)

☐ Building Addition/Site Alteration (Fee $200)

☐ Rezoning (Fee $500)

☐ Final Subdivision (Fee $500)

☐ CUP Amendment or Transfer (Fee $200)

☐ Time Extension on Approval (Fee $100)

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:**_____

<u>Staff Use Only:</u>

☐ 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:_____