



**PLANNING COMMISSION  
PROJECT DEVELOPMENT APPLICATION**

**SUBMITTAL REQUIREMENTS**

*\* 1 hard copy of all materials for submittal + PDF copy of submittal on USB thumb drive or CD  
Fold hard copy submittals larger than 8½"x11"*

ADDRESS/LOCATION			
	TAX MAP:	GROUP:	PARCEL:
SUMMARY OF NATURE OF REQUEST AND WORK			

REQUEST DATE FOR PRE-APPLICATION CONFERENCE		<i>Pre-application meetings are scheduled for Wednesdays.</i>
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SELECT REQUEST	SUBMITTALS SHALL INCLUDE BUT NOT LIMITED TO:
<input type="checkbox"/> Annexation <input type="checkbox"/> Rezoning <input type="checkbox"/> Sketch Plat – <i>Must be submitted at least two weeks prior to Preliminary Plat submittal</i> <input type="checkbox"/> Preliminary Plat <input type="checkbox"/> Final Plat <input type="checkbox"/> PUD Preliminary Master Plan + Checklist <input type="checkbox"/> PUD Final Site Plan + Checklist <input type="checkbox"/> Multi-Family Site Plan <input type="checkbox"/> Other: <hr/> <p><i>*File naming nomenclature examples:</i></p> <p><i>Freedom Point Site Plan</i>  <i>Freedom Point Master Plan</i>  <i>Freedom Point Final Plat</i>  <i>Freedom Point Elevations</i></p>	<p><u>Annexations/Rezoning:</u></p> <input type="checkbox"/> Written Legal Description copy <input type="checkbox"/> Requested Zone Listed <input type="checkbox"/> Compliance with Comprehensive Plan <input type="checkbox"/> Annexation Permission Form <input type="checkbox"/> Plans and/or Plats conforming to City standards
	<p><u>Plats/PUDs:</u></p> <ul style="list-style-type: none"> <li>• Project Name (include Sections &amp; Phases) _____</li> <li>• Total Number of Lots _____</li> <li>• Total acreage _____</li> </ul>

Applications and all required submittals must be filed with the Department of Development Services prior to the established deadline. Both the applicant and property owner (if different from applicant) must sign the application.

**APPLICANT**

All communications go to the Applicant's email that is provided.

NAME		PHONE	
ADDRESS		EMAIL	

PROPERTY OWNER NAME		PHONE	
ADDRESS		EMAIL	

In filling out this application, I attest that (1) I am familiar with the rules, regulations, and procedures of the City of Columbia & (2) all information contained herein is accurate & true to the best of my knowledge.

APPLICANT NAME	APPLICANT SIGNATURE	DATE

PROPERTY OWNER NAME	PROPERTY OWNER SIGNATURE	DATE

*STAFF USE ONLY*

DOCKET NO.		FEE PAID	
RECEIPT NO.		REQUESTED AGENDA	

DATE NOTICES SENT TO ADJACENT PROPERTY OWNERS	
DATE OF PUBLIC NOTICES IN DAILY HERALD	

BOARD ACTION	
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