



Supplemental Form (SF)

<p>SUBDIVISION</p> <p><input checked="" type="checkbox"/> Major subdivision action</p> <p><input type="checkbox"/> Minor subdivision action</p> <p><input type="checkbox"/> Vacation</p> <p><input type="checkbox"/> Variance (Non-Zoning)</p> <p>SITE DEVELOPMENT PLAN</p> <p><input type="checkbox"/> for Subdivision</p> <p><input type="checkbox"/> for Building Permit</p> <p><input type="checkbox"/> Administrative Amendment/Approval (AA)</p> <p><input type="checkbox"/> IP Master Development Plan</p> <p><input type="checkbox"/> Cert. of Appropriateness (LUCC)</p> <p>STORM DRAINAGE (Form D)</p> <p><input type="checkbox"/> Storm Drainage Cost Allocation Plan</p>	<p>S Z ZONING & PLANNING</p> <p><input type="checkbox"/> Annexation</p> <p>V <input type="checkbox"/> Zone Map Amendment (Establish or Change Zoning, includes Zoning within Sector Development Plans)</p> <p>P <input type="checkbox"/> Adoption of Rank 2 or 3 Plan or similar</p> <p><input type="checkbox"/> Text Amendment to Adopted Rank 1, 2 or 3 Plan(s), Zoning Code, or Subd. Regulations</p> <p>D <input type="checkbox"/> Street Name Change (Local & Collector)</p> <p>L A APPEAL / PROTEST of...</p> <p><input type="checkbox"/> Decision by: DRB, EPC, LUCC, Planning Director, ZEO, ZHE, Board of Appeals, other</p>
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PRINT OR TYPE IN BLACK INK ONLY. The applicant or agent must submit the completed application in person to the Planning Department Development Services Center, 600 2nd Street NW, Albuquerque, NM 87102. Fees must be paid at the time of application. Refer to supplemental forms for submittal requirements.

APPLICATION INFORMATION:

Professional/Agent (if any): RIO GRANDE ENGINEERING PHONE: 505.321.9099
 ADDRESS: PO BOX 93924 FAX: _____
 CITY: ALB STATE NM ZIP 87199 E-MAIL: david@riograndeengineering.com

APPLICANT: SILVER OAK DEVELOPERS PHONE: _____
 ADDRESS: PO BOX 20688 FAX: _____
 CITY: ALBUQUERQUE STATE NM ZIP 87154 E-MAIL: _____
 Proprietary interest in site: OWNERS **List all owners:** _____

DESCRIPTION OF REQUEST:

FINAL PLAT

Is the applicant seeking incentives pursuant to the Family Housing Development Program? Yes. No.

SITE INFORMATION: ACCURACY OF THE EXISTING LEGAL DESCRIPTION IS CRUCIAL! ATTACH A SEPARATE SHEET IF NECESSARY.

Lot or Tract No. LOT 13, 14, 19, 20 Block: BLOCK 8 Unit: TR-A, UN-B
 Subdiv/Addn/TBKA: NORTH ALB ACRES
 Existing Zoning: SU2 NC Proposed zoning: SU2-NC MRGCD Map No _____
 Zone Atlas page(s): C18 UPC Code: 101806448540610319, 101806446940610320
 101806446938310313, 101806448638410314

CASE HISTORY:

List any current or prior case number that may be relevant to your application (Proj., App., DRB-, AX_, Z_, V_, S_, etc.): _____

CASE INFORMATION:

Within city limits? Yes Within 1000FT of a landfill? NO
 No. of existing lots: 2 No. of proposed lots: 20 Total site area (acres): 3.5
 LOCATION OF PROPERTY BY STREETS: On or Near: ALAMEDA NE
 Between: SAN PEDRO and LOUISIANA

Check if project was previously reviewed by: Sketch Plat/Plan or Pre-application Review Team(PRT) Review Date: _____

SIGNATURE

(Print Name) DAVID SOULE DATE _____ Applicant: Agent:

FOR OFFICIAL USE ONLY

Revised: 4/2012

<input type="checkbox"/> INTERNAL ROUTING	Application case numbers	Action	S.F.	Fees
<input type="checkbox"/> All checklists are complete	_____	_____	_____	\$ _____
<input type="checkbox"/> All fees have been collected	_____	_____	_____	\$ _____
<input type="checkbox"/> All case #s are assigned	_____	_____	_____	\$ _____
<input type="checkbox"/> AGIS copy has been sent	_____	_____	_____	\$ _____
<input type="checkbox"/> Case history #s are listed	_____	_____	_____	\$ _____
<input type="checkbox"/> Site is within 1000ft of a landfill	_____	_____	_____	\$ _____
<input type="checkbox"/> F.H.D.P. density bonus				Total
<input type="checkbox"/> F.H.D.P. fee rebate				\$ _____
	Hearing date _____			

Project # _____

Staff signature & Date _____