



Supplemental Form (SF)

SUBDIVISION	S	Z	ZONING & PLANNING
<input type="checkbox"/> Major subdivision action			<input type="checkbox"/> Annexation
<input checked="" type="checkbox"/> Minor subdivision action			
<input type="checkbox"/> Vacation	V	<input type="checkbox"/>	Zone Map Amendment (Establish or Change Zoning, includes Zoning within Sector Development Plans)
<input type="checkbox"/> Variance (Non-Zoning)			
SITE DEVELOPMENT PLAN	P	<input type="checkbox"/>	Adoption of Rank 2 or 3 Plan or similar
<input type="checkbox"/> for Subdivision		<input type="checkbox"/>	Text Amendment to Adopted Rank 1, 2 or 3 Plan(s), Zoning Code, or Subd. Regulations
<input type="checkbox"/> for Building Permit			
<input type="checkbox"/> Administrative Amendment (AA)			
<input type="checkbox"/> Administrative Approval (DRT, URT, etc.)	D	<input type="checkbox"/>	Street Name Change (Local & Collector)
<input type="checkbox"/> IP Master Development Plan			
<input type="checkbox"/> Cert. of Appropriateness (LUCC)	L A	APPEAL / PROTEST of...	
STORM DRAINAGE (Form D)		<input type="checkbox"/>	Decision by: DRB, EPC, LUCC, Planning Director, ZEO, ZHE, Board of Appeals, other
<input type="checkbox"/> Storm Drainage Cost Allocation Plan			

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.

PDF copy of the completed application along with all the plans and documents being submitted must be emailed to (PLNDRS@cabq.gov) prior to processing this application. **(Zipped files and files over 9 Megabytes will not get delivered via email, Therefore, PDF files must be provided on a CD)**

APPLICATION INFORMATION:

Professional/Agent (if any): Cartesian Surveys PHONE: 505-896-3050
 ADDRESS: PO Box 41444 FAX: 505-891-0244
 CITY: Rio Rancho STATE NM ZIP 87124 E-MAIL: cartesianamber@gmail.com
 APPLICANT: Samir Patel PHONE: _____
 ADDRESS: PO Box 91720 FAX: _____
 CITY: Albuquerque STATE NM ZIP 87199 E-MAIL: taurus5468@gmail.com
 Proprietary interest in site: _____ List all owners: McLeod Realty Co.

DESCRIPTION OF REQUEST: Adjust interior lot line between two existing parcels and create two new parcels.

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. Tracts-A-3-C & 2-A-3-D Block: _____ Unit: _____
 Subdiv/Addn/TBKA: McLeod Business Park
 Existing Zoning: C-3 Proposed zoning: C-3 MRGCD Map No _____
 Zone Atlas page(s): F-17 UPC Code: 101706126234120410 (Tract 2-A-3-C)
101706126931820412 (Tract 2-A-3-D)

CASE HISTORY:

List any current or prior case number that may be relevant to your application (Proj., App., DRB-, AX_, Z_, V_, S_, etc.): _____
DRB Project #1011471, 18DRB-70092

CASE INFORMATION:

Within city limits? Yes Within 1000FT of a landfill? No
 No. of existing lots: 2 No. of proposed lots: 2 Total site area (acres): 4.9556 Acres
 LOCATION OF PROPERTY BY STREETS: On or Near: Jefferson St NE
 Between: McLeod NE and Interstate 25
 Check if project was previously reviewed by: Sketch Plat/Plan or Pre-application Review Team(PRT) Review Date: _____

SIGNATURE Amber Palmer DATE 4/16/18
 (Print Name) Amber Palmer Applicant: Agent:

FOR OFFICIAL USE ONLY

<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 _____