



DEVELOPMENT REVIEW BOARD APPLICATION

ffactive 8/12/202

Please check the appropriate box(es) and refer to supplemental forms for submittal requirements. All fees must be paid at the time of application.						
SUBDIVISIONS	☐ Final Sign off of EPC Site Plan(s) (Form P2A)			☐ Extension of IIA: Temp. Def. of S/W (Form V2)		
☐ Major – Preliminary Plat (Form S1)	★ Amendment to Site Plan (Form P2) Revised 2022-01-27 by KZ			☐ Vacation of Public Right-of-way (Form V)		
☐ Major – Bulk Land Plat (Form S1)	MISCELLANEOUS APPLICATIONS			☐ Vacation of Public Easement(s) DRB (Form V)		
☐ Extension of Preliminary Plat (Form S1)	☐ Extension of Infrastructure List or IIA (Form S1)			□ Vacation of Private Easement(s) (Form V)		
☐ Minor Amendment - Preliminary Plat (Form S2)	☐ Minor Amendment to Infrastructure List (Form S2)			PRE-APPLICATIONS		
☐ Minor - Final Plat (Form S2)	☐ Temporary Deferral of S/W (Form V2)			☐ Sketch Plat Review and Comment (Form S2)		
☐ Minor – Preliminary/Final Plat (Form S2)	☐ Sidewalk Waiver (Form V2)					
SITE PLANS	☐ Waiver to IDO (Form V2)		APPEAL			
- DRB Site Plan (Form P2)	☐ Waiver to DPM (Form V2)			☐ Decision of DRB (Form A)		
BRIEF DESCRIPTION OF REQUEST						
Site Plan Amendment for a new 2-lane drive-through restaurant. Revised 2022-01-27 by KZ						
APPLICATION INFORMATION						
Applicant:			Phone:			
Address:		Email:				
City:	State:	Zip:				
Professional/Agent (if any):			Phone:			
Address:			Email:			
City:	State:	Zip:				
Proprietary Interest in Site: List all owners						
SITE INFORMATION (Accuracy of the existing I	egal description is cru	cial! Attach a separate sheet if	necessa	ry.)		
Lot or Tract No.:	Block:	Unit:				
Subdivision/Addition:		MRGCD Map No.:	UPC Code: 101806428134810229		134810229	
Zone Atlas Page(s):	Existing Zoning:		Proposed Zoning			
# of Existing Lots:	# of Proposed Lots:		Total Area of Site (Acres):			
LOCATION OF PROPERTY BY STREETS						
Site Address/Street: Between: and:						
CASE HISTORY (List any current or prior project and case number(s) that may be relevant to your request.)						
I certify that the information I have included here a	nd sent in the required i	notice was complete, true, and a	ccurate to	the extent of my kno	wledge.	
Signature: Kevin Zenke			Dat	Date: (revised 01/20/2022)		
Printed Name: ☐ Applicant or ☐ Agent						
FOR OFFICIAL USE ONLY						
Case Numbers Action	n Fees	Case Numbers		Action	Fees	
Meeting Date:			Fee	Fee Total:		
Staff Signature:	Date:	Pro	Project #			