



Please check the appropriate box and refer to supplemental forms for submittal requirements. All fees must be paid at the time of application.

Administrative Decisions	Decisions Requiring a Public Meeting or Hearing	Policy Decisions
<input type="checkbox"/> Archaeological Certificate (Form P3)	<input type="checkbox"/> Site Plan – EPC including any Variances – EPC (Form P1)	<input type="checkbox"/> Adoption or Amendment of Comprehensive Plan or Facility Plan (Form Z)
<input type="checkbox"/> Historic Certificate of Appropriateness – Minor (Form L)	<input type="checkbox"/> Master Development Plan (Form P1)	<input type="checkbox"/> Adoption or Amendment of Historic Designation (Form L)
<input type="checkbox"/> Alternative Signage Plan (Form P3)	<input type="checkbox"/> Historic Certificate of Appropriateness – Major (Form L)	<input type="checkbox"/> Amendment of IDO Text (Form Z)
<input checked="" type="checkbox"/> Minor Amendment to Site Plan (Form P3)	<input type="checkbox"/> Demolition Outside of HPO (Form L)	<input type="checkbox"/> Annexation of Land (Form Z)
<input type="checkbox"/> WTF Approval (Form W1)	<input type="checkbox"/> Historic Design Standards and Guidelines (Form L)	<input type="checkbox"/> Amendment to Zoning Map – EPC (Form Z)
	<input type="checkbox"/> Wireless Telecommunications Facility Waiver (Form W2)	<input type="checkbox"/> Amendment to Zoning Map – Council (Form Z)
		Appeals
		<input type="checkbox"/> Decision by EPC, LC, ZHE, or City Staff (Form A)

APPLICATION INFORMATION

Applicant: LEAH SMITH		Phone: 817-302-2563
Address: 1300 SUMMIT AVENUE SUITE 300		Email: LSMITH@CORE-STATES.COM
City: FORT WORTH	State: TX	Zip: 76102
Professional/Agent (if any): CORE STATES GROUP		Phone: 817-302-2563
Address: 1300 SUMMIT AVENUE SUITE 300		Email: LSMITH@CORE-STATES.COM
City: FORT WORTH	State: TX	Zip: 76102
Proprietary Interest in Site:	List <u>all</u> owners:	

BRIEF DESCRIPTION OF REQUEST

ADDING A CROSSWALK AND 2 PEDETRIAN SIGNS TO THE PARKINGN LOT.

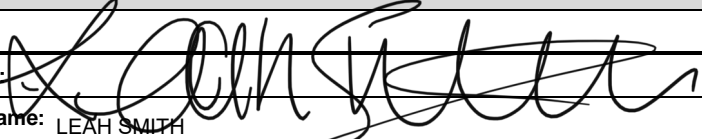
SITE INFORMATION (Accuracy of the existing legal description is crucial! Attach a separate sheet if necessary.)

Lot or Tract No.:	Block:	Unit:
Subdivision/Addition:	MRGCD Map No.:	UPC Code:
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: 8511 GOLF COURSE RD. NW Between: PASEO DEL NORTE BLVD NE and: GOLF COURSE RD NW

CASE HISTORY (List any current or prior project and case number(s) that may be relevant to your request.)

Signature: 	Date: 05/29/20
Printed Name: LEAH SMITH	<input type="checkbox"/> Applicant or <input type="checkbox"/> Agent

FOR OFFICIAL USE ONLY

Case Numbers	Action	Fees	Case Numbers	Action	Fees
Meeting/Hearing Date:				Fee Total:	
Staff Signature:		Date:		Project #	

FORM P3: ADMINISTRATIVE DECISIONS AND MINOR AMENDMENTS

A single PDF file of the complete application including all plans and documents being submitted must be emailed to PLNDRS@cabq.gov prior to making a submittal. Zipped files or those over 9 MB cannot be delivered via email, in which case the PDF must be provided on a CD.

INFORMATION REQUIRED FOR ALL ADMINISTRATIVE DECISIONS OR AMENDMENTS

- Letter of authorization from the property owner if application is submitted by an agent
- Zone Atlas map with the entire site clearly outlined and labeled

ARCHEOLOGICAL CERTIFICATE

- Archaeological Compliance Documentation Form with property information section completed
- Only the information above is required unless the City Archaeologist determines that the application does not qualify for a Certificate of No Effect, in which case a treatment plan prepared by a qualified archaeologist that adequately mitigates any archeological impacts of the proposed development must be submitted and reviewed for a Certificate of Approval per the criteria in IDO Section 14-16-6-5(A)(3)(b)

MINOR AMENDMENT TO SITE PLAN – ADMIN, EPC, or DRB

- Justification letter describing, explaining, and justifying the request per the criteria in IDO Section 14-16-6-4(X)(2)
- Three (3) copies of all applicable sheets of the approved Site Plan being amended, folded
- Copy of the Official Notice of Decision associated with the prior approval
- Three (3) copies of the proposed Site Plan, with changes circled and noted
Refer to the Site Plan Checklist for information needed on the proposed Site Plan.

Minor Amendments must be within the thresholds established in IDO TABLE 6-4-5. Any amendment beyond these thresholds is considered a Major Amendment and must be processed through the original decision-making body for the request.

MINOR AMENDMENT TO SITE DEVELOPMENT PLAN APPROVED PRIOR TO THE EFFECTIVE DATE OF THE IDO

- Justification letter describing, explaining, and justifying the request per the criteria in IDO Section 14-16-6-4(Y)(1)(a)
- Three (3) copies of all applicable sheets of the approved Site Development Plan being amended, folded
- Copy of the Official Notice of Decision associated with the prior approval
- Three (3) copies of the proposed Site Development Plan, with changes circled and noted
Refer to the Site Plan Checklist for information needed on the proposed Site Plan.

Minor Amendments must be within the thresholds established in IDO TABLE 6-4-5. Any amendment beyond these thresholds is considered a Major Amendment and must be processed through the original decision-making body for the request.

ALTERNATIVE SIGNAGE PLAN

- Proposed Alternative Signage Plan compliant with IDO Section 14-16-5-12(F)(5)
- Justification letter describing, explaining, and justifying the request per the criteria in IDO Section 14-16-6-5(F)(4)(c)
- Required notices with content per IDO Section 14-16-6-4(K)(6)
- Office of Neighborhood Coordination notice inquiry response and proof of emailed notice to affected Neighborhood Association representatives
- Sign Posting Agreement

<p><i>I, the applicant or agent, acknowledge that if any required information is not submitted with this application, the application will not be scheduled for a public meeting or hearing, if required, or otherwise processed until it is complete.</i></p>	
<p>Signature: </p>	<p>Date: 05/29/20</p>
<p>Printed Name: LEAH SMITH</p>	<p><input type="checkbox"/> Applicant or <input type="checkbox"/> Agent</p>
<p>FOR OFFICIAL USE ONLY</p>	
<p>Project Number: _____</p>	<p>Case Numbers</p>
<p>_____</p>	<p>-</p>
<p>_____</p>	<p>-</p>
<p>_____</p>	<p>-</p>
<p>Staff Signature: _____</p>	
<p>Date: _____</p>	