

Application #:	
Date Submitted:	
Meeting Date:	
Date Approved:	

CITY OF PARKVILLE • 8880 Clark Avenue • Parkville, MO 64152 • (816) 741-7676 • FAX (816) 741-0013

## Site Plan / Development Plan Application

1. Applicant / Contact Information	
Applicant(s)	Owner(s), if different from applicant
Name:	Name:
Company:	Company:
Address	Address:
City, State	City, State:
Phone: Fax:	Phone: Fax:
E-mail	E-mail:
Person(s) preparing plans	Contact Person, if different from applicant
Name:	Name:
Company:	Company:
Address	Address:
City, State	City, State:
Phone: Fax:	Phone: Fax:
E-mail	E-mail:
	any violations from the provisions of such or from the fines, punishments and revocation of approvals as applicable.  Date:
Property Owner's Signature (Required)	
2. Property Information	
Zoning district:	
•	
Description of proposed use(s):	
Gross acreage of lot:	Net acreage of lot:
Open space acreage:	Lot coverage:
	or new construction? alteration new construction

	Application #:	
3.	Factors affecting the project	
Ar	e any public improvements required for this project?	
Ex	plain (may be attached):	
sh	nes the proposed site / development plan meet the following criteria? Attach a separate Yes No eet explaining how / why. nes the proposal conform to the provisions of the City's Zoning Code?	
	pes the proposal conform to the provisions of the City's subdivision regulations? pes the proposal conform to the goals and objectives of the City's Master Plan?	
ls	the proposed development compatible with the surrounding area?	
Does the proposal conform to customary engineering standards used in the City?		
	e the streets, paths, walkways and driveways located so as to enhance connectivity, culation and safety and minimize any adverse traffic impact on the surrounding area?	
Ple	ease note below other comments or factors relating to the proposed development (may be attached):	
_		
4.	Checklist of required submittals	
_	Completed application, including site plan with all required details and supporting data.	
	Nonrefundable application fee of \$300.00.	
	Five (5) copies 24" x 36" size, or larger sets, one (1) 11 x 17 size set, and one (1) electronic set (pdf format) of the development plan and elevations for staff and service providers review. Please note additional copies will be required for submittal to the Planning Commission, and Board of Aldermen.	
	Five (5) paper copies and one (1), electronic copy (pdf format) of any supporting documentation for staff and service providers review. Please note additional copies will be required for submittal to the Planning Commission, and Board of Aldermen.	
	Authorization signature of the applicant and owner of record of the property.	
	If subject to covenants and/or deed restrictions, signed approval of the association/entity enforcing such.	
Fo	or City Use Only	
Аp	plication accepted as complete by:	
•	plication accepted as complete by:  Name/Title  Date	
Ар	plication fee payment:   Check #   M.O   Cash Received from:	
□ F	inal reimbursable costs paid (if applicable). Date of Action:	
Pla	anning Commission Action: Approved Approved with Conditions Denied Date of Action:	

Board of Aldermen Action: Approved Approved with Conditions Denied Date of Action:

Conditions if any:

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