



DEVELOPMENT APPLICATION

City of Greenwood Village

Community Development Department

6060 S. Quebec Street

Greenwood Village, CO 80111-4591

PlanningStaff@greenwoodvillage.com

(303) 486-5783; FAX (303) 773-1238

Please Type or Print All Information

PROPOSAL/REQUEST

Name of Project/Development _____

Address/Location of Property _____

Legal Description (may be separate sheet) _____

Existing Zoning _____ Proposed Zoning _____ Site Size _____ (acres)

- | | |
|---|---|
| <input type="checkbox"/> Admin. Subdivision Plat (R-1.0 Zone) | <input type="checkbox"/> Planned Sign Program |
| <input type="checkbox"/> BOAA Appeal Application | <input type="checkbox"/> Planned Unit Development / Amend. (PUD) |
| <input type="checkbox"/> BOAA Variance Application | <input type="checkbox"/> Revocable License Agreement |
| <input type="checkbox"/> Certified Survey Map | <input type="checkbox"/> Rezoning |
| <input type="checkbox"/> Landscape Plan Amend. For Water Conservation | <input type="checkbox"/> Site Development Plan / Amend. (SDP) |
| <input type="checkbox"/> Lot Line Adjustment | <input type="checkbox"/> Special Use Permit / Amend. (SUP) |
| <input type="checkbox"/> Major Subdivision | <input type="checkbox"/> Wireless Communications Facility – City Council Review |
| <input type="checkbox"/> Minor Subdivision | <input type="checkbox"/> Vacation of Interior Lot Line |
| <input type="checkbox"/> Master Development Plan / Amendment | <input type="checkbox"/> Vacation of Public ROW / Easement |

If an amendment, name of Plan/Plat/Project being amended: _____

APPLICANT

Name & Firm: _____

Telephone: _____ Email: _____

Address: _____

City/State/Zip: _____

PROPERTY OWNER (if different from applicant)

Name & Firm: _____

Telephone: _____ Email: _____

Address: _____

City/State/Zip: _____

CONTACT PERSON/OWNER'S REPRESENTATIVE

Name & Firm: _____

Telephone: _____ Email: _____

Address: _____

City/State/Zip: _____

NOTE: All required materials and application processing fees must be submitted with this application in order for review of your request to begin. If you need information on the required materials and fees, please contact the Village's Planning staff at (303) 486-5783.

Applicant's Signature: _____ **Date** _____

Property Owner's Signature: _____ **Date** _____

*****FOR DEPARTMENT USE ONLY*****

Date Submitted: _____ Accepted By: _____

Case Number: _____ Project Manager: _____