

APPLICATION FOR SITE PLAN REVIEW

This is an application for a site plan review. The form must be completed and filed with the Zoning Administrator at City Hall, 200 West Kechi Road, P. O. Box 88, Kechi, Kansas 67067 or FAX: (316) 744-9636.

(AN INCOMPLETE APPLICATION CANNOT BE ACCEPTED.)

1. Name of applicant(s) and/or his/her agent(s).
 - a. Applicant _____
 Address _____ Phone _____
 Agent, if any _____
 Address _____ Phone _____
 - b. Applicant _____
 Address _____ Phone _____
 Agent, if any _____
 Address _____ Phone _____

(Use a separate sheet, if necessary, for names of additional applicants.)

2. The applicant hereby requests a review of a site plan titled _____
 _____ which is proposed in the _____
 _____ District under the City Zoning Regulations.

3. The property is legally described as Lot(s) _____ of
 Block _____ in the _____
 _____ subdivision.

(If appropriate, metes and bounds description may be provided in the space below or on an attached sheet.)

4. Dimensions of the zoning lot are _____ feet in depth by _____ feet
 in width and _____ acres (round to the nearest tenth) or _____
 square feet in area.

5. The general location of the property is (use appropriate section):

a. The address is _____.

b. At the _____ corner of _____ Street and _____ Street.

c. On the _____ side of _____ Street between _____ Street and _____ Street.

6. Is this property part of a recorded plat? Yes _____ No _____

If no, has a plat been submitted? _____

7. The property is presently used for _____ and this site plan is requested for the following purposes:

8. I (We), the applicant(s), acknowledge receipt of the Site Plan Review Criteria and further state that I (we) have or will read the material. If an agent, I further state that I have or will provide the Applicant(s) an explanation of or copy of this material. I (We) realize that this application cannot be processed unless it is complete and is accompanied by the appropriate filing fee.

Applicant Date Applicant Date

Agent (If any) Date Agent (If any) Date

OFFICE USE ONLY

This application was received by the Zoning Administrator at _____:_____ (a.m., p.m.) on _____, 20____. It has been checked and found to be complete and accompanied by the required copies of the site plan and the filing fee of \$_____.

cc: Applicant

Zoning Administrator