



| <b>PROPERTY OWNER INFORMATION</b><br><input type="checkbox"/> CHECK IF POINT OF CONTACT FOR APPLICATION | <b>DESIGN PROFESSIONAL INFORMATION</b><br><input type="checkbox"/> CHECK IF POINT OF CONTACT FOR APPLICATION |
|---|--|
| Owner's Name<br>(Please list if more than one)  | Representative's Name<br>and Company   |
| Address   | Address  |
| City, State, Zip  | City, State, Zip   |
| Telephone   | Telephone  |
| Email   | Email  |

| <b>SUBJECT PROPERTY INFORMATION</b> |  |
|-------------------------------------|--|
| Owner of Record                     |  |
| Address                             |  |
| Locator/Parcel<br>Number(s)         |  |
| Area in Acres                       |  |
| Zoning District                     |  |
| Full Description of<br>Current Use  |  |

| <b>PROJECT SCOPE</b>                          |  |
|---|--|
| Full Description of<br>Proposed Scope of Work |  |
| Full Description of<br>Proposed Use           |  |