

# DESIGN REVIEW APPLICATION



## Check Project Type

- Central Planning District – Duplex, Multi-Family, Group Living, Institutional/Civic
- City Plaza / Sidewalk Café
- Projecting Signs
- Public/Private Partnership Agreement (TIF)
- Urban Renewal Project
- PRM Zone

Project Address: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name of Property Owner: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Project Description: \_\_\_\_\_

Four sets of all drawings and written materials must be submitted along with this application to Housing and Inspection Services. *The following requirements must be submitted unless specifically exempted by a Design Review staff member.* An application for review of a duplex, multi-family, group living or institutional building in the Central Planning District requires a statement detailing how the proposed project meets each of the applicable design review standards as specified in Section 14-2B-6I of the Zoning Code. Check all that have been submitted with the application.

- |   |  |
|---|--|
| <input type="checkbox"/> Site Analysis & Site Plan                            | <input type="checkbox"/> Landscaping Plan                      |
| <input type="checkbox"/> All Building Elevations (color may be required)      | <input type="checkbox"/> Sectional Drawings                    |
| <input type="checkbox"/> Drawings of Proposed Signs & Sign Permit Application | <input type="checkbox"/> Floor Plans                           |
| <input type="checkbox"/> Lighting Plan – placement, fixture type, lumens      | <input type="checkbox"/> Applicant's Statement for CPD project |

All submittal requirements should follow accepted conventions; namely, all drawings should be clearly labeled, scales shown, north arrow on plan and have clear and readable linework. The Design Review Committee will assume that the submitted plans accurately reflect all details of the proposed project so please submit clear, accurate and precise plans. For questions call 319-356-5120.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

## Staff Use Only: Applicable Design Review Sections

- 14-3C-3C: Design Review Guidelines
- 14-2A-6: Single Family Site Development Standards
- 14-2B-6: Multi-Family Site Development Standards
- 14-4B-4: Provisional Use Criteria
- 14-5A-5F: Structured Parking Standards
- 14-5C: Access Management Standards
- Other