



CITY OF LONGMONT PLANNING AND DEVELOPMENT SERVICES DEPARTMENT
 385 Kimbark Street, Longmont, CO 80501
 303-651-8330 / 303-651-8696 (fax)
 longmont.planning@longmontcolorado.gov
 www.longmontcolorado.gov

SHADED AREAS FOR STAFF USE ONLY

PRIMARY APPLICATION FORM

PROJECT NUMBER	PROJECT TITLE – AS IT APPEARS ON PLANS	PROJECT MANAGER
----------------	--	-----------------

<p>APPLICATION – MAJOR</p> <ul style="list-style-type: none"> <input type="checkbox"/> ANNEXATION REFERRAL <input type="checkbox"/> ANNEXATION AND CONCEPT PLAN <input type="checkbox"/> COMPEHENSIVE PLAN AMENDMENT <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> DEVELOPMENT CODE AMENDMENT <input type="checkbox"/> PRELIMINARY SUBDIVISION PLAT <input type="checkbox"/> REZONING <input type="checkbox"/> CONCEPT PLAN AMENDMENT <input type="checkbox"/> PUD OVERALL DEVELOPMENT PLAN <input type="checkbox"/> VACATION OF RIGHT-OF-WAY OR EASEMENT <input type="checkbox"/> VARIANCE (P/Z) <input type="checkbox"/> DEVELOPMENT AGREEMENT - VESTED PROPERTY RIGHT <input type="checkbox"/> OTHER _____ 	<p>APPLICATION – MINOR/ADMINISTRATIVE</p> <ul style="list-style-type: none"> <input type="checkbox"/> FINAL SUBDIVISION PLAT <input type="checkbox"/> MINOR SUBDIVISION PLAT <ul style="list-style-type: none"> <input type="checkbox"/> CONVEYANCE PLAT <input type="checkbox"/> PROPERTY/LOT LINE ADJUSTMENT <input type="checkbox"/> SITE PLAN <input type="checkbox"/> PUD SITE PLAN <input type="checkbox"/> LIMITED USE REVIEW <input type="checkbox"/> ADMINISTRATIVE MODIFICATION <input type="checkbox"/> ALTERNATE PARKING PLAN <input type="checkbox"/> TEMPORARY USE - SALES TRAILER/MODEL HOME <input type="checkbox"/> TEMPORARY USE – OTHER _____ <input type="checkbox"/> OTHER _____ <p>• EXCEPTION TO CITY STANDARDS – REFER TO CITY STANDARDS • SHORT TERM RENTALS, SITE PLAN WAIVER/CHANGE OF USE, or CERTIFICATE OF LEGAL NONCONFORMING STATUS – REFER TO ONLINE APPLICATION</p>
---	--

PRE-APPLICATION CONFERENCE HELD WITH: _____

DATE OF PRE-APPLICATION CONFERENCE: _____

DATE OF NEIGHBORHOOD MEETING (IF APPLICABLE) _____

PROPERTY INFORMATION

Property Address (if applicable) _____

Parcel Record Number(s) _____

Property Legal: Block(s) _____ Lot(s) _____ (or attach legal description)

Subdivision name(s) _____

Property Area: Acres _____ Square Feet _____ Parcel No. _____

Existing Zoning _____ Proposed Zoning, if applicable _____

Comprehensive Plan Map Designation _____

Existing Use(s) _____

Proposed Use(s) _____

PROPOSED RESIDENTIAL UNITS (INDICATE NUMBER OF UNITS BY TYPE)		
_____ Single family detached	_____ Single family attached (2-4 units)	_____ Multi-family (5+ units)
_____ Condos/Townhomes	_____ Accessory dwelling units	_____ Other-specify: _____
PROPOSED NON-RESIDENTIAL CONSTRUCTION:		
<input type="checkbox"/> Building addition <input type="checkbox"/> New building(s) _____ Number of buildings (existing and proposed) _____ Total square feet of addition or new buildings		
PROPERTY OWNER / APPLICANT / CONSULTANT INFORMATION		
Property Owner(s) _____		
Address _____		
Phone _____ Fax _____ E-mail _____		
Applicant(s) _____		
Address _____		
Phone _____ Fax _____ E-mail _____		
Consultant _____		
Address _____		
Phone _____ Fax _____ E-mail _____		
Consultant _____		
Address _____		
Phone _____ Fax _____ E-mail _____		
CONTACT PERSON		
Identify a single person to serve as the contact for Planning and Development Services during the review process. This will be the only person notified by Planning and Development Services Division regarding comments and meetings (if needed). The contact person is responsible for notifying other parties who may be involved in the project.		
Name _____ Address _____		
Phone _____ Fax _____ E-mail _____		
Contact Preference: Phone <input type="checkbox"/> or Email <input type="checkbox"/>		
CERTIFICATION		
I certify that the information and exhibits I have submitted are true and correct to the best of my knowledge. In filing the application I am acting with the knowledge and consent of those persons who are owners of the subject property and are parties to this application. I understand that all materials required by the City of Longmont must be submitted prior to having this application processed and that additional fees or materials may be required as a result of processing of this application.		
Signature _____	Date _____	
Signature _____	Date _____	