



# Minor Amendment Application Submittal Requirements

City Staff Contact: \_\_\_\_\_

Project Name: Minor Amendment- \_\_\_\_\_

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

Zoning: \_\_\_\_\_ A.P.N.: \_\_\_\_\_ Quarter Section: \_\_\_\_ - \_\_\_\_

Associated References: Project Number: \_\_\_\_\_ -PA- \_\_\_\_\_ Plan Check Number \_\_\_\_\_ Case(s) \_\_\_\_\_

Request: \_\_\_\_\_

Owner Contact: \_\_\_\_\_

Applicant Contact: \_\_\_\_\_

Company: \_\_\_\_\_

Company: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

E-mail: \_\_\_\_\_

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

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

**Submittal Requirements: Please submit 1 copy of materials requested below. All plans must be folded.**

- Completed Application (this form) and Application Fee -- \$** (fee subject to change every July)
- Narrative** describing reasons for the request.
- Property Owner's Authorization-** provide signature below. If more than one owner exists, or an agent is involved, all parties involved shall sign the Affidavit of Authority form.
- Homeowners/Property Owners Association Approval** (if applicable).
- Photographs of Site** – including all areas of request.
- Site Plan** indicating the specific portion of the property affected by the minor amendment; indicate dimensions of structures, as well as any required and proposed setbacks.
- Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please Note:**

- An application for a minor amendment procedure is inapplicable to the Foothills Overlay District, Environmentally Sensitive Lands Overlay District, Downtown District, and Downtown Overlay District.
- Property Owner Notification- the owner shall send notice, by first class mail, of the application to the property owners within (300) feet of any lot line of the property on which the amended is requested. *Contact Planning Administration Manager 480-312-7000 for current mailing list.*
- The Zoning Administrator shall issue a decision on the specific minor amendment requested no sooner than (30) nor later than (45) days after notice has been mailed.

\_\_\_\_\_  
Signature      Circle One:   Applicant   Owner

\_\_\_\_\_  
Date

**Official Use Only:**

Submittal Date: \_\_\_\_\_

City Staff Signature: \_\_\_\_\_

## Planning & Development Services Department

7447 E Indian School Road, Suite 105, Scottsdale, AZ 85251 • Phone: 480-312-7000 • Fax: 480-312-7800