



Project Application

Project Number: _____ - PA - _____ Case Number: _____ - _____ - _____ Date: _____

Staff Signature required PRIOR to submittal

This Document Constitutes A Public Disclosure Under ARS Section 39-121, Inspection of Public Records

Applicant to Complete Section Below

- Case Type:**
- | | | |
|--|---|--|
| <input type="checkbox"/> Abandonment (AB) | <input type="checkbox"/> Master Plan Map (MP) | <input type="checkbox"/> Rezoning (ZN) |
| <input type="checkbox"/> Changes to a Recorded Plat (PC) | <input type="checkbox"/> Master Sign Program (MS) | <input type="checkbox"/> Text Amendment (TA) |
| <input type="checkbox"/> Change to Existing Lots (PC) | <input type="checkbox"/> Minor Subdivision (MD) | <input type="checkbox"/> Use Permit (UP) |
| <input type="checkbox"/> Development Review (DR) | <input type="checkbox"/> Preliminary Plat (PP) | <input type="checkbox"/> Variance (BA) |
| <input type="checkbox"/> General Plan Amendment (GP) | <input type="checkbox"/> Other: _____ | |

Project Name: _____

Project Address: _____

Current Zoning District: _____ Parcel Number(s): _____ - _____ - _____ Quarter Section: _____ - _____

Request: _____

The property owner shall designate an agent for the project. This person (the applicant) shall attend pre-application conferences and public hearings, will receive the agenda, recommendations, and case reports, and will communicate all case information to other parties as required. All contact for this project will be made through the applicant listed below.

Owner: _____
 Company _____
 Phone: _____ Fax: _____
 E-mail: _____
 Address: _____

Developer: _____
 Company _____
 Phone: _____ Fax: _____
 E-mail: _____
 Address: _____

Architect: _____
 Company _____
 Phone: _____ Fax: _____
 E-mail: _____
 Address: _____

Engineer: _____
 Company _____
 Phone: _____ Fax: _____
 E-mail: _____
 Address: _____

Applicant Contact: _____ Phone: _____
 Applicant E-mail: _____ Fax: _____
 Applicant Address: _____

Owner Signature

Applicant Signature

OFFICIAL USE ONLY

Staff Signature: _____ E-mail: _____@ScottsdaleAZ.gov 480-312- _____

This application needs a: New Project Number or Old Project Number: _____ Date: _____

Planning & Development Services Department

7447 E. Indian School Road, Suite 100, Scottsdale, AZ 85251 ♦ Phone: 480-312-7000 ♦ Fax: 480-312-7088