

# City of Valparaiso

## Application For Site Review

To be completed by the applicant and submitted via email in PDF format to [sitereview@valpo.us](mailto:sitereview@valpo.us) or to the office of the Clerk Treasurer along with the processing fee of \$100.00 payable to the City of Valparaiso. Applications not accompanied by the processing fee will be held until payment is received. Applications shall be submitted with 11 sets of project drawings and/or site plans to be reviewed by the Site Review Committee. Application and fee shall be received at least one week (five working days) prior to the meeting for which review is sought. Site Review takes place every Tuesday beginning at 9am on a first-come first-served basis. Call 462-1161 or [sitereview@valpo.us](mailto:sitereview@valpo.us) for more information.

Property Address \_\_\_\_\_

Project Name \_\_\_\_\_

Business Name \_\_\_\_\_

Applicant Name \_\_\_\_\_ Relationship to Project \_\_\_\_\_

Company \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Developer Information	Property Owner Information
Name _____	Name _____
Address _____	Address _____
City, State, Zip _____	City, State, Zip _____
Phone _____	Phone _____
Email _____	Email _____

Description of project: \_\_\_\_\_

Has this project been reviewed by the Site Review Committee before? \_\_\_\_\_ If yes, when? \_\_\_\_\_

Has any element of the project changed? \_\_\_\_\_ Has any of the project contact information changed? \_\_\_\_\_

If yes, what changes have taken place? \_\_\_\_\_

**Acknowledgement of Terms**

The undersigned applicant, as representative for the aforementioned project, acknowledges the application requirements as outlined above, and understands the application will be held until proper receipt of complete application and application fee. Upon receipt of the application, fee, and required materials, the application will be processed and the applicant will be notified of the date and time of the review of the project as submitted. Site Reviews expire after a period of one year from date of meeting.

Applicant Signature   X   \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**OFFICE USE ONLY:**

Date Received \_\_\_\_\_ Payment Received \_\_\_\_\_ Receipt Number \_\_\_\_\_