


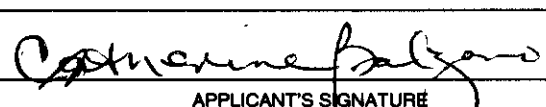
PROJECT APPLICATION
COMMUNITY DEVELOPMENT
7447 E. INDIAN SCHOOL ROAD
SCOTTSDALE, AZ 85251
(480) 312-7000 FAX (480) 312-7788

Note:
Coordinator
signature required
prior to submittal.


<input type="checkbox"/> GEN'L PLAN AMENDMENT _____ <input checked="" type="checkbox"/> REZONING _____ <input type="checkbox"/> PRELIMINARY PLAT _____ <input type="checkbox"/> USE PERMIT _____ <input type="checkbox"/> DEVELOPER REVIEW _____	<input type="checkbox"/> MASTER SIGN PROGRAM _____ <input type="checkbox"/> LOT SPLIT _____ <input type="checkbox"/> VARIANCE _____ <input type="checkbox"/> ABANDONMENT _____ <input type="checkbox"/> OTHER _____
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

CASE # _____
Q.S. _____
PROJECT # 346-PA- 02

APPLICANT FILL OUT BELOW

PROJECT NAME State Property		PROJECT LOCATION (ADDRESS) East of Scottsdale Rd. North and South of Loop 101	
REQUEST Amend Planned Community Development		CURRENT ZONING See Attached	
		PARCEL IN ACRES - -	
		NET: GROSS:	
		BOOK, MAP, PARCEL:	
Current OWNER Name		Street Address 1616 W. Adams	Phone (602) 542-4621
Company Arizona State Land Department		City/State/Zip Phoenix, Arizona 85007	FAX (602) 542-2590
DEVELOPER Name N/A		Street Address	Phone
Company		City/State/Zip	FAX
ARCHITECT Name N/A		Street Address	Phone
Company		City/State/Zip	FAX
ENGINEER Name Darrell Wood		Street Address 2051 W. Northern, Ste. 100	Phone (602) 335-8500
Company Wood, Patel & Associates, Inc.		City/State/Zip Phoenix, Arizona 85021	FAX (602) 335-8580
<small>The owner shall designate either himself, or his architect, engineer, or agent as the coordinator for the project. This person will attend pre-application conferences, and will receive the agenda, recommendations and case reports. All contacts will be made for this project through the person named as coordinator below.</small>			
APPLICANT/COORDINATOR NAME		Street Address	Phone
Catherine Balzano		1616 W. Adams	(602) 542-4621
Company		City/State/Zip	FAX
Arizona State Land Department		Phoenix, Arizona 85007	(602) 542-2590
 OWNER'S SIGNATURE		 APPLICANT'S SIGNATURE	
Michael E. Anable		Catherine Balzano	
PRINT NAME		PRINT NAME	
Arizona State Land Department		Arizona State Land Department	
REPRESENTING		REPRESENTING	

OFFICIAL USE ONLY

YOUR STAFF COORDINATOR: 
THIS APPLICATION NEEDS A: ☒ NEW # OR ☐ OLD PROJECT #

(480) 312- 2524 PRE-APP. DATE 7/02

346-PA-2002

8/7/02

19-ZN-2002

8/30/2002