



**PROJECT APPLICATION**  
**COMMUNITY DEVELOPMENT**  
**7447 E. INDIAN SCHOOL ROAD**  
**SCOTTSDALE, AZ 85251**  
**(480) 312-7000 FAX (480) 312-7088**

Note:  
 Coordinator signature  
 required prior to  
 submittal.

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

CASE # 214 - PA - 2004

Q.S. 45-57, 45-58, 46-57, 46-58

PROJECT # 214 - ~~PA~~ - 2004

APPLICANT FILL OUT BELOW			
PROJECT NAME <b>Crown Communities</b>	PROJECT LOCATION (ADDRESS) <b>122nd Street &amp; Alameda Road</b>		
REQUEST <b>Request approval of density incentive for current R1-130 ESL zoning to increase allowed units from 101 dwelling units to 121 dwelling units</b>	CURRENT ZONING <b>R1-130 ESL</b>		PARCEL IN ACRES -- NET: _____ GROSS: <b>330 acres</b>
		BOOK, MAP, PARCEL: <b>See attached title report</b>	
Current OWNER Name Company <b>Crown Communities</b>	Street Address <b>3600 Thayer Court #100</b> City/State/Zip <b>Aurora, IL 69504</b>	Phone: Fax: Email: <b>630-851-5490</b> <b>630-898-0480</b>	
Current Engineer: Company <b>Wood - Patel</b> <b>Gordon Wark</b>	Street Address <b>1855 N. Stapley</b> City/State/Zip <b>Mesa, AZ 85203</b>	Phone: Fax: Email: <b>480-834-3300</b> <b>480-834-3320</b>	
Current OWNER Name Company	Street Address City/State/Zip	Phone: Fax: Email:	
Current OWNER Name Company	Street Address City/State/Zip	Phone: Fax: Email:	
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.			
APPLICANT/COORDINATOR NAME Company <b>John Berry</b> <b>Berry &amp; Damore, LLC</b>	Street Address <b>6750 E. Camelback Road</b> City/State/Zip <b>Ste. 103</b> <b>Scottsdale, AZ 85251</b>	Phone Fax Email <b>480-385-2727</b> <b>480-385-2757</b>	
<b>see attached letter</b>		OWNER'S SIGNATURE	
PRINT NAME		APPLICANT'S SIGNATURE	
REPRESENTING		PRINT NAME	
REPRESENTING		REPRESENTING	

**OFFICIAL USE ONLY**

YOUR STAFF COORDINATOR: *Jim Curtis 2/8/2005* (480) 312- *4210* PRE-APP. DATE \_\_\_\_\_

THIS APPLICATION NEEDS A:  NEW # OR  OLD PROJECT #

WHITE/FILE

YELLOW/APPLICANT

**1-ZN-2005**  
**2-8-05**

CD03250 (09/2003)  
 (500 - 09/03)