

Development Application



Development Application Type:

Please check the appropriate box of the Type(s) of Application(s) you are requesting

Zoning	Development Review	Land Divisions
☐ Rezoning (ZN)	☐ Development Review (Major) (DR)	☐ Subdivision (PP)
☐ In-fill Incentive (II)	☐ Development Review (Minor) (SA)	☐ Subdivision (Minor) (MD)
☒ Conditional Use Permit (UP)	☐ Wash Modification (WM)	☐ Land Assemblage
☐ Text Amendment (TA)	☐ Historic Property (HP)	Other
☐ Development Agreement (DA)	Wireless Communication Facilities	☐ Annexation/De-annexation (AN)
Exceptions to the Zoning Ordinance	☐ Small Wireless Facilities (SW)	☐ General Plan Amendment (GP)
☐ Minor Amendment (MN)	☐ Type 2 WCF DR Review Minor (SA)	☐ In-Lieu Parking (IP)
☐ Hardship Exemption (HE)	Signs	☐ Abandonment (AB)
☐ Variance/Accommodation/Appeal (BA)	☐ Master Sign Program (MS)	Other Application Type Not Listed
☐ Special Exception (SX)	☐ Community Sign District (MS)	☐ Other:

Project Name: Old Town Tavern

Project Address: 7330 E. Main St., Ste 10, Scottsdale AZ 85251

Property's Current Zoning District Designation: _____

The property owner shall designate an agent/applicant for the Development Application. This person shall be the owner's contact for the city regarding this Development Application. The agent/applicant shall be responsible for communicating all city information to the owner and the owner application team.

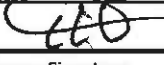
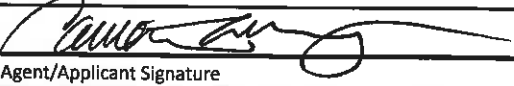
Owner: Paul Mitchell		Agent/Applicant: Cameron Morgan	
Company: Miccio Enterprises, LLC		Company: Attorney at Law	
Address: 8102 E. Foothills Dr.		Address: 6619 N. Scottsdale Rd.	
Phone: 480-275-9989	Fax:	Phone: 480-990-9507	Fax:
E-mail: psmiccio@aol.com		E-mail: cameron.morgan@hotmail.com	
Designer:		Engineer:	
Company:		Company:	
Address:		Address:	
Phone:	Fax:	Phone:	Fax:
E-mail:		E-mail:	

Please indicate in the checkbox below the requested review methodology (please see the descriptions on page 2).

- This is not required for the following Development Application types: AN, AB, BA, II, GP, TA, PE and ZN. These applications will be reviewed in a format similar to the Enhanced Application Review methodology.

☐ **Enhanced Application Review:** I hereby authorize the city of Scottsdale to review this application utilizing the Enhanced Application Review methodology.

☐ **Standard Application Review:** I hereby authorize the city of Scottsdale to review this application utilizing the Standard Application Review methodology.

	
Owner Signature	Agent/Applicant Signature

Official Use Only: Submittal Date: _____ Development Application No.: _____

Planning and Development Services

7447 E. Indian School Road, Suite #105, Scottsdale, AZ 85251 • www.ScottsdaleAZ.gov