

PRELIMINARY DEVELOPMENT PLAN APPLICATION

Johnson County Planning Department
111 S. Cherry Street, Suite 3500
Olathe, Kansas 66061
913-715-2201

Office Use Only

Application No. _____
Township _____
ZB Hearing Date _____ Date Received _____
Rezoning Application No. _____ Fee _____ Date Paid _____

APPLICANT/AGENT INFORMATION

OWNER INFORMATION

NAME _____
ADDRESS _____
CITY/ST/ZIP _____

PHONE _____
FAX _____

NAME _____
ADDRESS _____
CITY/ST/ZIP _____

PHONE _____
CONTACT _____

PROPERTY INFORMATION

Project Name _____

Present Zoning _____ Property ID No. _____
Rezoning Application No. _____ BOCC Resolution No. _____
Address of Property _____ Total Project Size _____
Present Improvements or structures _____

PROPOSED USE INFORMATION

Phase _____ Acreage _____
Proposed Land Use _____
Proposed Improvements _____

ENGINEER/ARCHITECT/DESIGNER

Firm/Agency _____
Address: _____
City/State/Zip _____
Contact _____ Phone No. _____ Fax: _____

I, the undersigned, am the (*Circle One*) (*owner*), (*duly authorized agent*), of the aforementioned property situated in the unincorporated portion of Johnson County, Kansas. By execution of my signature, I do hereby officially apply for Development Plan approval.
Signature: _____ Date: _____