



Minor Site Improvements

Preliminary Application

Project #:
MSI _____

Staff Use Only	Submittal Date _____ Date Accepted as Complete _____ Application Fee Paid: \$400.00 Date _____ R# _____ Paid By: _____ Includes up to three submittals reviews. See Title 13 for re-submittal fees.
	Administrative Approval: Yes ___ No ___ Date _____ Fire Inspection Required: Yes ___ No ___ PC Approval Required: Yes ___ No ___ Date _____ Conditions of Approval: _____

Fill out this form completely, supplying all necessary information and documentation to support your request.

Project Name _____
 Site Address _____
 Location Description _____
 Acreage _____ Lot _____ Blk _____ Subdivision _____
 Parcel No(s). _____ S-T-R _____

Current Zoning: _____ Current Use: _____
 Proposed Zoning: _____ Proposed Use: _____
 _____ # of Lots _____ # of Structures _____ # of Common Lots _____ # of Detention Lots _____ Other _____

Summation of Work to be Performed:

	APPLICANT	ENGINEER
Firm Name		
Contact		
Address		
Telephone		
Email		

	OWNER	DEVELOPER
Firm Name		
Contact		
Address		
Telephone		
Email		

Which of the above assumes responsibility for expenses incurred outside the initial application fee?
 ___ Applicant ___ Owner ___ Developer ___ Engineer/Surveyor ___ Other: _____

Printed Name and Signature of Owner/Applicant or Authorized Agent: (Need Proxy signed below if other than Property Owner Signature)

 Owner/Company/Partnership/Trust Name Property Owner / Authorized Signature Date



FOR OFFICE USE ONLY

Proof of Ownership Provided	<input type="checkbox"/> Y	<input type="checkbox"/> N	
Individual Authorization for Company Provided	<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> NA
If Multiple Owners, All Signatures Provided	<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> NA

AUTHORIZATION OF PROXY

TO: THE CENTERTON PLANNING COMMISSION:

I, _____ hereby authorize
(owner/trustee/managing partner/etc.**)

_____ to represent me and to
(Authorized representative)

make decisions on my behalf for _____
(List all affiliated projects)

which is to be presented to the Centerton Planning Commission / City Council for review and approval.

Company/Partnership/Trust Name

Owner

Date

Owner

Date

State of Arkansas
County of _____

Sworn to and subscribed before me this _____ *day of* _____, 20__.

Notary Public _____

My Commission Expires _____

** If property is owned by multiple individuals, all owners must sign proxy form. If all owners sign simultaneously, one notary block may be provided. If owners sign at separate times, a notary block must be provided for each signature.

If property if owned by a corporation, LLC or other, provide documentation of individual signer's authority and their authorization to sign document(s) on business' behalf.