

CURRENT PLANNING DIVISION

410 E. 5th Street | Loveland, CO 80537 | 970-962-2523 eplan-planning@cityofloveland.org | cityofloveland.org/DC

APPLICATION

This form is required as part of a complete development application.

Project Name:									
Application Type(s):									
Project Information									
Description of Project , including purpose and other relevant information									
Location : Describe property location and major crossroads									
Legal Description (Lots, Blocks, Tracts and Subdivision Name. For Metes & Bounds attach document)									
Address of Existing Buildings or Property									
Proposed Utilities									
Water	Loveland	Fort Collins- Loveland Water	District	Little Thompson Water District					
Wastewater	Loveland	South Fort Collins Sanitation	District	On-Site Septic					
Power	Loveland	Poudre Valley REA		Xcel Energy					
Ditch Company if ditch is within property boundaries:									
Floodplain or Floodway within Property Boundaries: Yes No									

Property Information								
Property Size			Within City Limits?	Yes	No			
Existing Zoning			Proposed Zoning					
Existing Use								
Proposed Use								

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Contact Information									
Applicant or Designated Representative for Project									
Identify one person to serve as the contact during the review process. This will be the only person notified by the City regarding comments and meetings (if needed). The contact person is responsible for notifying other parties who may be involved in the project.									
Company:	Name:			Phone:					
Address: City, State: Zip Code:									
Email Address:			Preferred Method of Contact	Phone	Email				
Property Owner									
Name and Representative:				Phone:					
Address:									
City, State				Zip Code					
Email Address:			Preferred Method of Contact	Phone	Email				
Consultant									
Company:	Name:			Phone:					
Email Address:		Preferred Method of Contact	Phone	Email					
Architect Engineer PI		er	Surveyor Other		ther				
Consultant									
Company:	Name:			Phone:					
Email Address:			Preferred Method of Contact	Phone	Email				
Architect	Architect Engineer Plan		Surveyo	or Other					
	of Representative if the								
The undersigned owner hereby designates the following as the representative for the all matters pertaining to this project:									
Representative:				_					
Owner's Signature:		Date:							
Certification by Owner or Representative									
 I certify that the information and exhibits I have submitted are true and correct to the best of my knowledge. I understand that all materials required by the City of Loveland must be submitted prior to having this application processed and that additional fees or materials may be required as a result of processing of this application. 									
Signature: Date:									