



Application for Combination Preliminary-Final Plat

PLAN COMMISSION

The application fee must accompany the application when submitted for processing. Please refer to the City’s website at <http://www.urbanaininois.us/fees> for the current fee associated with this application. **The Applicant is responsible for paying the cost of the recording fee**, which generally begins at a minimum of \$75.00 and ranges upward depending upon the number of pages of required associated documents. Staff will calculate the final recording fee and request a check from the applicant to be made out to the Champaign County Recorder prior to the document being recorded.

DO NOT WRITE IN THIS SPACE - FOR OFFICE USE ONLY

Date Request Filed _____ Plan Case No. _____
Fee Paid - Check No. _____ Amount _____ Date _____

PLEASE PRINT OR TYPE THE FOLLOWING INFORMATION

1. APPLICANT CONTACT INFORMATION

Name of Applicant(s): _____ Phone: _____
Address (*street/city/state/zip code*): _____
Email Address: _____
Property interest of Applicant(s) (Owner, Contract Buyer, etc.): _____

2. OWNER INFORMATION

Name of Owner(s): _____ Phone: _____
Address (*street/city/state/zip code*): _____
Email Address: _____
Is this property owned by a Land Trust? Yes No
If yes, please attach a list of all individuals holding an interest in said Trust.

NOTE: Applications must be submitted by the owners of more than 50% of the property’s ownership.

3. PROPERTY INFORMATION

Name of Major Subdivision: _____
Address/Location of Subject Site: _____
PIN # of Location: _____

Current Zoning Designation:

Current Land Use (*vacant, residence, grocery, factory, etc*):

Total Site Acreage: _____ Total Number of Lots: _____ Acreage Per Lot: _____

Legal Description (*If additional space is needed, please submit on separate sheet of paper*):

4. CONSULTANT INFORMATION

Name of Architect(s): Phone:

Address (*street/city/state/zip code*):

Email Address:

Name of Engineers(s): Phone:

Address (*street/city/state/zip code*):

Email Address:

Name of Surveyor(s): Phone:

Address (*street/city/state/zip code*):

Email Address:

Name of Professional Site Planner(s): Phone:

Address (*street/city/state/zip code*):

Email Address:

Name of Attorney(s): Phone:

Address (*street/city/state/zip code*):

Email Address:

5. If the proposed development is not a subdivision, mobile home park, or a planned unit development, but is a major development (as defined by Chapter 21, Development Code, of the Urbana Code of Ordinances) please attach a statement which includes the following information:

Type of Construction:

Residential Commercial Industrial Quarrying or Mining Activity

If multiple family dwellings are proposed, the total number of buildings _____ and the number of units per buildings _____

- 6. If the property is located within the City's extraterritorial jurisdiction, has the Champaign County Zoning Board of Appeals granted any variance, exception or Special Use Permit concerning this property? If so, please list case name and case number:

Case Name:

Case Number:

- 7. If the property is located within the corporate limits of the City of Urbana, has the City of Urbana Board of Zoning Appeals or the Urbana City Council granted any variance, exception, conditional use permit or special use permit concerning this property? If so, please list case name and case number:

Case Name:

Case Number:

- 8. Are any waivers of the development standards or minimum engineering design standards requested as part of this application? If so, please attach appropriate waiver application forms to this application.

NOTE: If additional space is needed to accurately answer any question, please attach extra pages to the application.

By submitting this application, you are granting permission for City staff to post on the property a temporary yard sign announcing the public hearing to be held for your request.

CERTIFICATION BY THE APPLICANT

I certify all the information contained in this application form or any attachment(s), document(s) or plan(s) submitted herewith are true to the best of my knowledge and belief, and that I am either the property owner or authorized to make this application on the owner's behalf.

Applicant's Signature

Date

PLEASE RETURN THIS FORM ONCE COMPLETED TO:

City of Urbana
Community Development Department Services
Planning Division
400 South Vine Street, Urbana, IL 61801
Phone: (217) 384-2440
Fax: (217) 384-2367

The following number and type of documents are to be submitted with this application:

PRELIMINARY PLAT OF MAJOR DEVELOPMENT

- A. ***Preliminary Plat*** – one full-sized print (24"x36"), one reduced print (11"x17"), and one digital copy in PDF format or the number of prints the Secretary requests.
- B. ***Traffic Impact Analysis*** – If required in the Urbana Subdivision and Land Development Code.
- C. ***General Area Plan*** – If required in the Urbana Subdivision and Land Development Code.
- D. ***Stormwater Management Plan*** – If required in the Urbana Subdivision and Land Development Code.

FINAL PLAT OF MAJOR DEVELOPMENT

- A. ***Final Plat*** – One full-sized print (24"x36"), one reduced print (11"x17"), and one digital copy in PDF format or the number of prints the Secretary requests
- B. ***Stormwater Management Plan*** – Two copies plus supporting documents
- C. ***New Waiver or Deferral Requests***
- D. ***County Clerk's Tax Certificate***
- E. ***School District Statement***
- F. ***Construction Bond*** – If required in the Urbana Subdivision and Land Development Code.
- G. ***Construction and Engineering Plans*** – Five complete sets of plans
- H. ***Owner's Certificate*** – Notarized and include any covenants