

LAKE HAVASU CITY

Preliminary Plat Subdivision/Amendment Application

Submit completed application to the Development Services Department / Planning Division:

2330 McCulloch Blvd N. / Lake Havasu City, AZ 86403 or planninginfo@lhcaz.gov

For Subdivision procedures, see Lake Havasu City Code Title 13.

APPLICATION NUMBER:				DATE:			
(1) OWNER NAME/MAILING ADDRESS/	CONTACT IN	FO					
					Phone:		
					Email:		
					Linaii.		
(2) APPLICANT NAME/MAILING ADDRE	SS/CONTAC	TINFO (if o	different tha	n Owner)			
					Phone:		
					Email:		
(3) SITE LOCATION							
Property Address:					Assessor I	Parcel ID(s):	
Township: Range	nip: Range: Section						
	:	Lot:					
(4) PROJECT INFORMATION							
Proposed Subdivision Name:			Tre	act Number:		Numb	er of Lots/Units:
				ici number.		- Nullio	
Existing Zoning: Prop	oosed Zoning:		-			Acres:	
(5) PRELIMINARY PLAT SUBMITTAL RE		rs (Provide	a bundled	set for each	Division a	s shown be	low)
Planning Set				ring Set		ng Set	
Document Required for Packet	Required	Received	Required	Received	Required	Received	
Preliminary Plat Maps	1		3 + PDF		1		
Preliminary Grading Plans / Soil Report	1				2		
Traffic Impact Analysis	1		2 + PDF				
Preliminary Stormwater Plan	1		3 + PDF				
Preliminary Wastewater Plan	1		3 + PDF				
Preliminary Water Plan	1		3 + PDF				
Water Allocation / Service Agreement	1		1 + PDF				
Water Allocation / Service Agreement Proposed Financial Assurance Type	2		1 + PDF				
Copy of Deed Restrictions	1						
Preliminary Title Report	1						
Note: Condominium projects require a declarat	ion which inclu	ides informati	ion required b	y A.R.S. Title	33, Chapter	9	-
Other/Notes:							
(6) APPLICATION PROCESSING TIMEFI		s					
.,							
 a) Staff routes documents to reviewing pa days) 	arties for com	ments; prep	ares and for	wards comm	nents for the	e applicant to	address. (15 business
b) Preliminary Plat scheduled for Planning	a & Zonina C	ommission r	meeting to a	oprove, cond	ditionally ap	orove, or der	v. (up to 45 business days)
Preliminary Plat Subdivision Filing I				r fees may		,	5 (1 - 5)
(7) CONTACT PLANNING FOR FURTHE				-			
Trevor Kearns, City Planner, Phone: (928) 854-0783, kearnst@lhcaz.gov							
Chris Gilbert, Planning Division Manag	,			lhcaz.gov			
(8) CLARIFICATION							
A person may request the City to clarif	, its internret	ation or ann	lication of a s	statute ordin	ance code	or policy aff	fecting the processing of this
application in accordance with ARS §		ation of appl				, or policy all	

(9) CERTIFICATION/ACKNOWLEDGEMENT

a) I hereby file the above request as an authorized applicant.

b) To the best of my knowledge, the information provided herein is accurate and true.

c) I am aware of the steps and timeframes involved in the processing of this application.

To submit this application electronically, Lake Havasu City requires that you certify your application by submitting an electronic signature. Please type your name in the field below and click the confirm signature check box.

SIGNATURE

DATE

<u>Notice</u>: Arizona Revised Statutes § 9-495 requires in any written communication between the City and a person, the City provide the name, telephone number, and email address of an employee to provide information if the communication: 1) Demands payment of a tax, fee, penalty, fine or assessment; 2) Denies an application for a permit or license that is issued by the City; or 3) Requests corrections, revisions or additional information or materials needed for approval of any application for a permit, license or other authorization that is issued by the City. The employee shall reply within five (5) business days after City's receipt of a communication if authorized and able.