



**PLANNING COMMISSION**  
**PROJECT DEVELOPMENT APPLICATION**  
*DEADLINE: 3<sup>RD</sup> MONDAY OF THE MONTH AT 4:00 PM*

ADDRESS/LOCATION	221 PORTER CIRCLE		
	TAX MAP: 075		PARCEL: 51.06
SUMMARY OF NATURE OF REQUEST AND WORK	REQUEST FOR SITE PLAN APPROVAL STRAIGHT ZONE COMPLIANCE FOR MANUFACTURED AND MODULAR HOMES		

REQUEST DATE FOR PRE-APPLICATION CONFERENCE	MTG HELD NOV 15	<i>Pre-application meetings are scheduled for Wednesdays between 8 and 10 am. Meeting must be requested by Monday of the same week.</i>
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**SUBMITTAL REQUIREMENTS**  
*25 copies of plan + PDF*  
*Fold all submittals larger than 8 1/2 "x11"*

SELECT REQUEST	PLAN SHALL INCLUDE
<input type="checkbox"/> Annexation <input type="checkbox"/> Annexation & Rezoning <input type="checkbox"/> Rezoning <input type="checkbox"/> Sketch Plat – <i>Must be submitted at least two weeks prior to Preliminary Plat submittal</i> <input type="checkbox"/> Preliminary Plat <input type="checkbox"/> Final Plat <input type="checkbox"/> PUD Master Plan <input type="checkbox"/> PUD Final Plan <input type="checkbox"/> Multi-Family Site Plan <input checked="" type="checkbox"/> Other <i>MHP SITE PLAN</i>	<u>Annexations/Rezoning:</u> <ul style="list-style-type: none"> <li>• Written Legal Description required</li> <li>• Requested zone</li> <li>• Compliance with Comprehensive Plan <i>Additional public notice is required for comprehensive plan amendments. See meeting schedule for dates.</i></li> <li>• Annexation Permission Form</li> </ul> <u>Plats/PUDs:</u> <ul style="list-style-type: none"> <li>• Project Name (include Sections &amp; Phases)</li> <li>• Total Number of Lots</li> <li>• Total acreage</li> </ul>

Applications and all required submittals must be filed with the Department of Development Services prior to the established deadline. Both the applicant and property owner (if different from applicant) must sign the application. A representative for the project is required to be present at the meeting, at the request of the Commission.

**APPLICANT**

NAME	CIVIL DESIGN CONSULTANTS	PHONE	615-638-8207
ADDRESS	8170 Coley Davis Rd., Nashville 37221	EMAIL	jared@civilconsultants.net

\* All communications go to the Applicant's email that is provided.

**PROPERTY OWNER**

NAME	Alvin Luna	PHONE	
ADDRESS	911 Baker Rd.	EMAIL	

*In filling out this application, I attest that (1) I am familiar with the rules, regulations, and procedures of the City of Columbia & (2) all information contained herein is accurate & true to the best of my knowledge.*

Jared R. Gray, PE

APPLICANT NAME



APPLICANT SIGNATURE

12-20-2024

DATE

\* Zoning Ordinance Article 3.3.3. Applications will be reviewed for completeness within 5 days of submittal. Incomplete applications will be removed and the applicant will be notified by certified mail listing incomplete information.\*

Alvin and Malinda Luna

PROPERTY OWNER NAME

Submittal allowed by Affidavit

PROPERTY OWNER SIGNATURE

DATE

*STAFF USE ONLY*

DOCKET NO.		FEE PAID	
RECEIPT NO.		REQUESTED AGENDA	
DATE NOTICES SENT TO ADJACENT PROPERTY OWNERS			
DATE OF PUBLIC NOTICES IN DAILY HERALD			
BOARD ACTION			