

TOWN OF PLOVER
SITE PLAN APPROVAL APPLICATION

Ten complete sets of plans are needed for the Plan Commission and Town Board review. This completed application and drawing's are required for the project to be added to the next Plan Commission Agenda.

OWNER: _____ PHONE NO: (____) _____

MAILING ADDRESS: _____

CONTRACTOR: _____ PHONE NO: (____) _____

MAILING ADDRESS: _____

OCCUPANT NAME: _____ PHONE NO: (____) _____

MAILING ADDRESS: _____

LEGAL DESCRIPTION OF PROPERTY: _____

TAX PARCEL NO: _____ SUBDIVISION: _____

TAX PARCEL IDENTIFICATION NUMBER (PIN): _____

LOT AREA IN SQUARE FEET: _____

SETBACKS: FRONT _____ REAR _____ LEFT _____ RIGHT _____ **(MUST BE CLEARLY NOTED ON SITE PLAN)**

PROPOSED BUILDING SIZE (IN SQUARE FEET): _____

FEET OF STREET FRONTAGE: _____

PARCEL SITE ADDRESS: _____

PROPOSED USE: _____

ZONING DISTRICT: _____

ADJACENT PROPERTY ZONING: _____

REZONING REQUIRED? ___NO ___YES IF YES, WHY? _____

VARIANCE REQUIRED? ___NO ___YES IF YES, WHY? _____

CONDITIONAL USE REQUIRED? ___NO ___YES IF YES, WHY? _____

TYPE OF OCCUPANCY: _____ ESTIMATED DATE: _____

IS OCCUPANCY COMPATIBLE WITH CURRENT ZONING? _____ YES _____ NO

WILL NOISE LEVEL BE CODE COMPLYING? _____ YES _____ NO

**THE FOLLOWING IS REQUIRED AT TIME OF SITE PLAN SUBMITTAL. PLEASE ATTACH ONE 11 x17”
PLOT PLAN OR PLANS SHOWING THE FOLLOWING FOR PLAN COMMISSION REVIEW:**

- NORTH ARROW, WRITTEN AND GRAPHIC SCALE
- ALL PROPERTY BOUNDARIES WITH DIMENSIONS
- ALL SETBACKS
- EXISTING AND PROPOSED CONTOURS/GRADING
- LOCATION AND NAMES OF CENTERLINE OF ADJOINING STREETS, PROPOSED DRIVEWAYS, AND PARKING
- LOCATION OF ANY EXISTING BUILDINGS, PROPOSED BUILDINGS OR ADDITIONS
- PROPOSED FLOOR ELEVATION IN RELATION TO EXISTING GRADE AND STREET GRADE
- LOCATIONS AND DESCRIPTIONS OF EASEMENTS
- LOCATIONS AND TYPE OF PROPOSED LIGHTING (LIGHTING PLAN WITH LIGHTING SPECIFICATIONS)
- LOCATIONS AND TYPE OF PROPOSED SCREENING (LANDSCAPING PLAN WITH PROPOSED QUANTITIES AND TYPES OF PLANT MATERIAL-INCLUDING EXISTING ON SITE VEGETATION)
- LOCATIONS AND TYPE OF PROPOSED SIGNS AND/OR EXISTING SIGNS
- LOCATIONS AND TYPE OF REFUSE ENCLOSURE
- COMPLETION OF DRAINAGE PLAN SPECIFICATION FORM (ATTACHED)

**PLEASE NOTE WHY ANY OF THE ABOVE ARE NOT CHECKED AND ENCLOSED AT TIME OF
SUBMITTAL:**

APPLICANT'S SIGNATURE: _____ DATE SIGNED: _____

APPLICANT'S PHONE NUMBER: _____ FAX NUMBER: _____

APPLICANTS EMAIL ADDRESS: _____