



This form is required for reservation on Zoning Adjustment hearing agendas for those projects that are referred through the Office of Customer Advocacy. This form is to assist those with adaptive reuse projects. **The form must be completed by staff from the Planning and Development Department Office of Customer Advocacy, a Principal Planner or a Planner III.**

Applicant Name:

Phone:

E-mail Address:

Applicant Address:

Location of the Site (specific address):

Scope of Project (office, retail, restaurant, residential, mixed use):

Zoning Adjustment Request(s) (fields can be expanded and additional rows added)

Zoning Ordinance Section #	Request	Requirement
Example: Section 702. A.3	Variance to reduce the number of required parking spaces to 9.	25 parking spaces required.

Referral by OCA or other authorized PDD staff:

Name (Print or Type)

Signature

Phone/Extension

Date

Planning Department Staff

Name of staff taking application

Date

Hearing Date

ZA Case #

For more information or for a copy of this publication in an alternate format, contact Planning & Development at 602-262-7811 voice or TTY use 7-1-1.