

For Office Use

Pre-Submittal Meeting Date _____

Planner Initials _____

Applicant _____

Pre-Submittal Code _____

Submittal Requirements: Conceptual Development Plan To be considered complete, this checklist must accompany a completed application form and include all of the materials listed below. **A pre-submittal meeting is also required** and may be completed in person, over the phone or via email depending on project complexity. Any submittal requirement waiver must be approved by the respective reviewing agency and the approved waiver must be submitted with this application to be considered complete. Failure to provide required materials will result in a returned application at which point processing will be delayed. Additional materials may be required.

To Be Provided By Applicant						
Submittal Requirements	Paper Size			PDF	Notes	Submitted by Applicant? (✓)
	8.5x11	11x17	24x36			
1 Application —signed by applicant and all property owners						
2 Fee —See fee schedule and include completed fee calculation sheet					Cash, check or credit card. Payable to City of Steamboat Springs.	
3 Proof of Ownership —Routt County Assessor printout or other documentation						
4 Detailed Narrative —detailed description of the project; address approval criteria in Section 708 of the CDC						
5 Variance Request —separate narrative; address each approval criteria in Section 719 of the CDC					Additional fee required	
6 Fire Flow Demand & Availability Calculations Form						
7 Complete Plan Set Including:					Collated and folded	
Coversheet						
Existing Conditions						
Site Plan						
Grading & Drainage Plan						
Landscape Plan						
Architectural Drawings						
Utility Plan						

To Be Provided By Applicant							
Submittal Requirements		Paper Size			PDF	Notes	Submitted by Applicant? (✓)
		8.5x11	11x17	24x36			
8	Reports: Preliminary Soils & Geo-Technical Report	2	0	0	✓		
9	Approved Waiver —if applicable						
10	Other						

Applicant Signature Required

I, the applicant, affirm that this proposal complies with all CDC regulations and standards, unless specifically requesting a variance, and that this application includes all the required materials to be deemed complete. I understand that if this application or any of the aforementioned submittal requirements are incomplete or found to be insufficient, this application will be returned and not processed any further.

Signature _____

Date _____

FOR REFERENCE ONLY