

**APPLICATION:**  
**Planning Board Review**  
**Fee: \$200**

1. Project Name: \_\_\_\_\_ 2. Date: \_\_\_/\_\_\_/\_\_\_

3. Your Name: \_\_\_\_\_

4. Your Address: \_\_\_\_\_

5. Telephone Number: (\_\_\_) \_\_\_-\_\_\_\_ 6. Fax Number: (\_\_\_) \_\_\_-\_\_\_\_

7. Your Company Name: \_\_\_\_\_

8. Your Company Address: \_\_\_\_\_

9. Your Company City/State/Zip: \_\_\_\_\_

10. Name of Client or Project: \_\_\_\_\_

11. Project Address: \_\_\_\_\_

12. Client Contact Name: \_\_\_\_\_

13. Client Contact Phone: (\_\_\_) \_\_\_-\_\_\_\_ 14. Fax: (\_\_\_) \_\_\_-\_\_\_\_

15. Client's Mailing Address: \_\_\_\_\_

16. Client's City/State/Zip: \_\_\_\_\_

17. Reason for Planning Board Review: \_\_\_ Subdivision Preliminary Plan \_\_\_ Final Plat \_\_\_ Replat  
 \_\_\_ Site Plan Review \_\_\_ Conceptual Plan \_\_\_ Lotsplit \_\_\_ Request for Zoning Amendment  
 \_\_\_ Special Use \_\_\_ Home Occupation \_\_\_ Other: \_\_\_\_\_

18. Describe Selection Above: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

19. Certification: I, \_\_\_\_\_, hereby affirm that I am the property owner or am authorized by the property owner to file this application for review. I further certify that this application and the attached plans and specifications are not a first draft product and represent the actual proposal for which I seek approval. I have investigated the City of New Carlisle Codified Ordinances and hereby certify that to the best of my knowledge, these plans conform to the pertinent requirements.

20. Signature: \_\_\_\_\_ 21. Date: \_\_\_/\_\_\_/\_\_\_

**OFFICE USE ONLY**

Received By: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_ Fee Paid: \$\_\_\_\_\_

**Project Name:** \_\_\_\_\_

<b>BUILDING INFORMATION</b>		
Number of Employees: _____	Building Capacity: _____	Number of Seats: _____
Building Height: _____	Building Footprint: _____	Building Floor Levels: _____
Total Floor Area: _____	Located in a Floodplain: ___ Yes or ___ No	
Boundary Clearances:		
Front Setback: _____	Rear Yard: _____	Left Side Yard: _____ Right Side Yard: _____
Other Building Information: _____		
_____		
_____		

<b>DOMESTIC WATER</b>
Size of Service Requested: _____
Basis for Design: _____
Water Service Details: _____
Fire Service Details: _____
Landscape Irrigation: _____

<b>SANITARY SEWER SERVICE</b>
Size of Service Requested: _____
Basis for Design: _____
Special Pre-Treatment: _____
Location, Connection: _____
_____
Sanitary Service Details: _____

**STORM WATER MANAGEMENT**

Storm Water Detention Plan: \_\_\_\_\_

Storm Water Retention Plan: \_\_\_\_\_

Outlet To: \_\_\_\_\_

100 Year Storm Calculations: \_\_\_\_\_

1 Year Storm Calculations: \_\_\_\_\_

Total Quantity of Detention Proposed: \_\_\_\_\_

Storm Piping Details: \_\_\_\_\_

FEMA Flood Zone: \_\_\_\_\_ Flood Zone Details: \_\_\_\_\_

**PARKING LOT DESIGN**

Type & Thickness of Paving: \_\_\_\_\_

\_\_\_\_\_

Total Number of Spaces: \_\_\_\_\_ Number of Handicap Accessible Spaces: \_\_\_\_\_

Minimum Size Parking Space: \_\_\_\_\_ Minimum Width of Aisle: \_\_\_\_\_

Number and Type of Truck Loading Spaces: \_\_\_\_\_

Parking Lot Layout: \_\_\_\_\_

Driveway Width: \_\_\_\_\_ ft. Driveway Details: \_\_\_\_\_

**EXTERIOR AND PARKING LOT ILLUMINATION**

Lumens: \_\_\_\_\_

Basis for Design: \_\_\_\_\_

Number of Exterior Lights: \_\_\_\_\_

Types: \_\_\_\_ Floodlights \_\_\_\_ Pole Mounted \_\_\_\_ Shoebox \_\_\_\_ Building Mounted

Lighting Details and Fixture Information: \_\_\_\_\_

\_\_\_\_\_

**LANDSCAPING**

See Landscape Plan on Sheet Number: \_\_\_\_\_

Width and Types of Landscaping Along Streets: \_\_\_\_\_

Width and Types of Perimeter Landscaping: \_\_\_\_\_

Total Area and Type in Parking Lot Interior: \_\_\_\_\_

Percentage of Interior Landscaping Compared to Paved Area: \_\_\_\_\_

Adjacent Uses: North: \_\_\_\_\_ South: \_\_\_\_\_

West: \_\_\_\_\_ East: \_\_\_\_\_

Type and Width of Landscape Buffer Along Property Lines: \_\_\_\_\_

\_\_\_\_\_

Irrigation: \_\_\_\_ Yes \_\_\_\_ No

Size, Type, and Number of New Trees: \_\_\_\_\_

\_\_\_\_\_

Size, Type, and Number of Trees Saved: \_\_\_\_\_

\_\_\_\_\_

Size, Type, and Number of Trees Removed or Destroyed: \_\_\_\_\_

\_\_\_\_\_

Size, Type, and Number of New Bushes, Shrubs: \_\_\_\_\_

\_\_\_\_\_

Percentage of Landscaped/Lawn Area Compared to Lot Area: \_\_\_\_\_

**OTHER PERTINENT INFORMATION**

Attach Additional Sheets as Needed

\_\_\_\_\_

\_\_\_\_\_