Cityof			
	Publication Date	Application No.	
Salina	Hearing Date	Date Filed	
	Vicinity Map	Filing Fee	
Planning & Community			
Development	Ownership Certificate	Receipt No.	

APPLICATION FOR PRELIMINARY PLANNED DEVELOPMENT DISTRICT (P.D.D.)

1. Applicant's Name				
2. Applicant's Address				
3. Telephone (daytime)	E-Mail Address			
4. Project Name				
5. Owner's Name				
6. Owner's Address				
7. Legal Description of Property to be developed (attach additional sheets if necessary				
8. Approximate Street Address				
9. Area of property (sq ft &/or acres)				
10. Present Zoning	Use			
11. Proposed Zoning	Use			
 12. Is the P.D.D. to be utilized in conjunction with another zone or independently? 13. Are there any covenants of record which affect the proposed development? (attach copy) 14. List reasons for this request (attach additional sheet if necessary) 				
15. Anticipated time period for substantial completion				
 15. Anticipated time period for substantial completion 16. Total ground area occupied by buildings (sq.ft.) 17. Describe any non-residential uses proposed 				
18. Number of housing units provided Single family - Multi-family -				
Applicant(s) Signature	Owner(s) Signature			
If the applicant is to be represented by legal counsel or an authorized agent, please complete the following in order that correspondence and communications pertaining to this application may be forwarded to the authorized individual.				
Name of representative Mailing Address, City, State, Zip Telephone (Business) and E-Mail				