CITY OF LINCOLN

Planning and Development Services Department Application Request Form

Planning and Development Services Department / 555 S 10th St, Ste 213 / Lincoln, NE 68508 Phone 402-441-7491 / Fax 402-441-6377 plan@lincoln.ne.gov

Subtype

Application Type

Date

File #

Category

Office Use Only

PC Final Action

Project Name			
Address/General Location			
Legal Description (Attach legal if necessary.)			
Parcel ID Number(s) (PID)			
Number of Acres	Number of lots being platted (Not outlots)	<i>F</i>	App # Being Amended
THE FOLLOWING INFORMATION	I IS NECESSARY TO HAVE A COMPLET	E APPLICATION	ON:
1. LETTER stating purpose of a	application. This statement shoul	d include in	formation concerning the reason for the
request(s), any associated ap	plications, projects or other inform	mation relat	ed to the application. This letter should
	iated with an application and just	ifications fo	r those waivers. If no waivers are
requested state "no waivers	•		
·	ote: Make checks payable to the C	•	
		_	/iew instructions on eplan submittal)
		Services De	epartment website for checklists with
specific requirements for eac	h type of project. plication may be returned as incomplete	if all requests	ed information is not provided
	City reserves the right to ask for addition		
Property Owner Name			Phone
Address		Email	
City	State	Zip	
Contact Name			Phone
Address		Email	
City	State	Zip	
ProjectDox Contact		ProjectDox Email	
* Property Owner Sign	ature:		

^{**} NOTE: If application is for a special permit or a use permit and the contact is not the owner of the property, the property owner must sign the application or the contact must attach written permission of the owner authorizing the contact to sign on behalf of the owner. By signing this application request form or granting the contact permission to sign on the owner's behalf, the owner hereby grants all authorized city/county personnel to access the property for purposes of review of this application.