



SITE DEVELOPMENT PLAN

APPLICATION

THE CITY OF WATFORD CITY
213 2ND ST NE / PO BOX 494
WATFORD CITY, NORTH DAKOTA

REQUIREMENTS: All applications must be legible, printed in ink or typed, and suitable for reproduction. *Original application with original Applicant signature is required.* A Site Development Plan is required to be submitted for any of the following types of projects: commercial, industrial, institutional, or multi-family residential with 4+ units. Site Development Plans are also required to be submitted for a change in use of property, new construction/additions of new/existing buildings and/or parking areas, streets, and utilities. For specific details regarding Site Development Plans, please refer to the *City of Watford City Municipal Code of Ordinances: CHAPTER XV ARTICLE XXIX.*

PROJECT NAME

PROPERTY OWNER INFORMATION

OWNER NAME:	PHONE NUMBER:	EMAIL:
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MAILING ADDRESS:

APPLICANT INFORMATION

Same as Owner

APPLICANT NAME:	PHONE NUMBER:	EMAIL:
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MAILING ADDRESS:

DEVELOPER INFORMATION

DEVELOPER NAME:	PHONE NUMBER:	EMAIL:
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MAILING ADDRESS:

PROPERTY INFORMATION

PROPERTY ADDRESS:	ZONING DISTRICT:
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PARCEL NUMBER:	SUBDIVISION:	LOT #	BLOCK #
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LEGAL DESCRIPTION: (SECTION, TOWNSHIP, RANGE)	IS PROPERTY ANNEXED? <input type="checkbox"/> YES <input type="checkbox"/> NO / E.T.A.	LOCATED IN FLOODPLAIN? <input type="checkbox"/> YES* <input type="checkbox"/> NO <small>*IF YES, A FLOODPLAIN DEVELOPMENT PERMIT IS REQUIRED.</small>
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CURRENT USE OF PROPERTY:	PROPOSED USE OF PROPERTY:
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DESCRIPTION

Please give a brief description of the proposed project.

PROJECT SPECIFICATIONS

Please complete the information below if applicable to this project. Unless specified, provide information according to the proposed project specifications, not existing.

EXISTING BUILDING SIZE: (SQ.FT.)		PROPOSED NEW BUILDING SIZE: (SQ.FT.)	PARCEL SIZE: (SQ.FT.)
OCCUPANT LOAD: (Commercial/Industrial)	TOTAL NUMBER OF UNITS: (Residential)		IS A VARIANCE REQUIRED? <input type="checkbox"/> YES* <input type="checkbox"/> NO <small>* VARIANCE APPLICATION MUST FIRST BE SUBMITTED AND APPROVED.</small>
FIRE PROTECTION SYSTEM: <input type="checkbox"/> YES <input type="checkbox"/> NO	BUILDING HEIGHT:	# OF STORIES:	IS A HEIGHT VARIANCE REQUIRED? <input type="checkbox"/> YES* <input type="checkbox"/> NO <small>*IF YES, A VARIANCE APPLICATION MUST FIRST BE SUBMITTED AND APPROVED. AN ADDITIONAL FEE WILL BE CALCULATED WITHIN PERMIT APPLICATION.</small>
CONSTRUCTION TYPE: <input type="checkbox"/> I-A <input type="checkbox"/> I-B <input type="checkbox"/> II-A <input type="checkbox"/> II-B <input type="checkbox"/> III-A <input type="checkbox"/> III-B <input type="checkbox"/> IV <input type="checkbox"/> V-A <input type="checkbox"/> V-B			
OCCUPANCY CLASSIFICATION: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> E <input type="checkbox"/> F <input type="checkbox"/> H <input type="checkbox"/> I <input type="checkbox"/> M <input type="checkbox"/> R <input type="checkbox"/> S <input type="checkbox"/> U			
NUMBER OF EXISTING OFF-STREET PARKING SPACES: REGULAR: _____ ADA: _____		NUMBER OF NEW OFF-STREET PARKING SPACES: REGULAR: _____ ADA: _____	
EXISTING TOTAL AREA OF PARKING LOT: (SQ.FT.)		NEW TOTAL AREA OF PARKING LOT: (SQ.FT.)	

SITE DEVELOPMENT PLAN REVIEW FEES

\$0.30 Fee per Square Foot

GROSS SQUARE FOOTAGE OF STRUCTURE: _____ SQ.FT.	FEE CALCULATIONS: <i>SQUARE FOOTAGE x \$0.30 REVIEW FEE</i>	SUBTOTAL REVIEW FEE: \$ _____
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UNIT FEE

FOR NON-RESIDENTIAL PROJECTS ONLY: An additional \$0.15 fee contribution will be collected per square foot. The fee is divided as follows: \$0.03 Police Services, \$0.03 Fire Protection, \$0.03 Ambulance Services, \$0.03 Public Parks, and \$0.03 School District.

UNIT FEE CALCULATIONS: SQUARE FOOTAGE: _____ X \$0.15 UNIT FEE	SUBTOTAL UNIT FEE: \$ _____
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FEE CALCULATIONS:
(REVIEW FEE + UNIT FEE)

TOTAL SITE DEVELOPMENT PLAN FEE: \$ _____

NOTICE:

All applications, fees, and plans are subject to review, verification, and approval by the City Planning, Building, Engineering, and Public Works Department as well as on occasion, third party agents. It will be the responsibility of the applicant and/or property owner to pay any additional fees associated with third party reviews for this project. The Site Development Plan Review process will not begin until all requirements are received. ALL PAYMENTS MADE TO THE CITY WILL BE NON-REFUNDABLE, NON-TRANSFERRABLE ONCE THE REVIEW PROCESS HAS STARTED. Please do **NOT** send payment until this application has been reviewed by the City.

SIGNATURES

APPLICANT (IF DIFFERENT THAN OWNER)

As the applicant, I certify that all information given on this application is correct, all City Ordinances, Standards, and Building Codes will be complied with and that the information within this application as well as the plans submitted are in all respects true and correct to the best of my knowledge and belief.

APPLICANT SIGNATURE:

DATE:

APPLICANT PRINT NAME:

APPLICANT TITLE:

PROPERTY OWNER(S)

I/We, the undersigned, swear that I am / we are, the owner(s) and/or Mortgage holders of the property described within this application. I/We certify that all information contained within this application are in all respects true and correct to the best of my/our knowledge and belief. I/We also hereby authorize City of Watford City Staff and/or its designee to access my property or premise for the purpose of gathering and verifying information in relation to this application and submitted plans.

PROPERTY OWNER SIGNATURE:

DATE:

PROPERTY OWNER SIGNATURE:

DATE:

PROPERTY OWNER NOTARY

On this _____ day of _____, 20____ before me, the undersigned, a notary public for the state of _____, personally appeared, _____ known to me to be the person(s) who executed the certificate in witness whereof, I have hereunto set my hand and affixed my official seal the day and year in the certificate first written above.

(NOTARIAL SEAL)

Notary Public

Notary Public for the state of _____

Residing at _____

My Commission Expires _____