



# DEVELOPMENT APPLICATION

City of Johnston, Iowa

Submission Date: \_\_\_\_\_

Fee Amount: \_\_\_\_\_

No application will be accepted unless it complies with all the submittal requirements. Incomplete application will be returned to the applicant without further review.

TYPE OF REQUEST:

- |   |  |
|---|--|
| <input type="checkbox"/> Zoning Map Amendment     | <input type="checkbox"/> Auditor's Plat    |
| <input type="checkbox"/> Site Plan Review         | <input type="checkbox"/> Plat of Survey    |
| <input type="checkbox"/> Planned Unit Development | <input type="checkbox"/> Minor Subdivision |
| <input type="checkbox"/> Grading Permit           | <input type="checkbox"/> Preliminary Plat  |
| <input type="checkbox"/> Administrative Approval  | <input type="checkbox"/> Final Plat        |

PROJECT NAME: \_\_\_\_\_

PROJECT LOCATION: \_\_\_\_\_

(Street Address or Project Location)

PROPERTY OWNER: \_\_\_\_\_

Name

Address

City

State

Zip

Phone

Fax

Email Address

APPLICANT: \_\_\_\_\_

Name

Address

City

State

Zip

Phone

Fax

Email Address

CONSULTANT:

(Architect, Engineer, etc.)

Name

Address

City

State

Zip

Phone

Fax

Email Address

PERSON TO BE BILLED: \_\_\_\_\_

Name

Address

City

State

Zip

Phone

Fax

Email Address

DESCRIBE SCOPE  
OF PROJECT:

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LEGAL DESCRIPTION:

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(May be attached separately)

OWNER AND APPLICANT SIGNATURE AND CONSENT:

I/we hereby submit and consent to the development application in the City of Johnston. I/we acknowledge that I/we may be responsible for additional costs for plan review by a consulting engineer and/or attorney. I/we certify that I/we am/are familiar with applicable state and local codes and ordinances, the procedural requirements of the City of Johnston, and have submitted ALL required information.

\_\_\_\_\_  
**Signature Property Owner**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Property Owner (Please Print)**

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Applicant (Please Print)**

**NOTE: ALL APPLICATIONS MUST HAVE THE CURRENT PROPERTY OWNER'S SIGNATURE(S), OR THE PERSONS WITH THE PROPER POWER OF ATTORNEY.**

For questions concerning this Development Application please contact:

Johnston Community Development Department:  
6221 Merle Hay Road  
P.O. Box 410  
Johnston, IA 50131  
Phone (515) 278-2344  
Fax (515) 727-7776  
www.cityofjohnston.com