

City of Mount Vernon Zoning Board of Appeals Application Materials Checklist and Submission Review



Development Name: _____

Application Type: New Amended Extension of Time

Location: _____

Map Page: _____ Block: _____ Lot(s): _____

Applicant Representative: _____

Mailing Address: _____

Phone #: _____ Fax #: _____ E-Mail: _____

Required Items

Provided

Staff Review

1. One (1) original copy of completed, signed and notarized application form	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Item provided <input type="checkbox"/> Not required <input type="checkbox"/> Statement of Non-Provision
2. One (1) original copy of the Plan Examiner's Report, issued by the Building Department	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Item provided <input type="checkbox"/> Not required <input type="checkbox"/> Statement of Non-Provision
3. One (1) original copy of the Information/Violation Search, issued by the Building Department	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Item provided <input type="checkbox"/> Not required <input type="checkbox"/> Statement of Non-Provision
4. One (1) original copy of Certificates of Occupancy issued by the Building Department	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Item provided <input type="checkbox"/> Not required <input type="checkbox"/> Statement of Non-Provision
5. One (1) original copy of completed and signed Environmental Assessment Forms	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Item provided <input type="checkbox"/> Not required <input type="checkbox"/> Statement of Non-Provision
6. One (1) original copy of the Statement of Principal Points including a detailed description of all proposed uses on the site	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Item provided <input type="checkbox"/> Not required <input type="checkbox"/> Statement of Non-Provision
7. One (1) copy of past Zoning Board Findings of Fact, Planning Board Resolutions or Architectural Review Board Decisions	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Item provided <input type="checkbox"/> Not required <input type="checkbox"/> Statement of Non-Provision
8. One (1) copy of current Zoning Board Findings of Fact, or Architectural Review Board proof of filing	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Item provided <input type="checkbox"/> Not required <input type="checkbox"/> Statement of Non-Provision
9. One (1) set of color photographs depicting four (4) views of the property	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Item provided <input type="checkbox"/> Not required <input type="checkbox"/> Statement of Non-Provision
10. One (1) copy of signed and sealed plot plans	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Item provided <input type="checkbox"/> Not required <input type="checkbox"/> Statement of Non-Provision
11. One (1) copy signed and sealed surveys	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Item provided <input type="checkbox"/> Not required <input type="checkbox"/> Statement of Non-Provision
12. One (1) copy of signed and sealed floor plans showing all floor space by type of use and floor level	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Item provided <input type="checkbox"/> Not required <input type="checkbox"/> Statement of Non-Provision
13. A copy of signed and sealed building elevations	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Item provided <input type="checkbox"/> Not required <input type="checkbox"/> Statement of Non-Provision
14. Application Fee	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Item provided <input type="checkbox"/> Not required <input type="checkbox"/> Statement of Non-Provision
15. Provide Financial Evidence	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Item provided <input type="checkbox"/> Not required <input type="checkbox"/> Statement of Non-Provision

Reviewed by: _____ Date: _____

Calendar Number Assigned: _____

MVPCD Revised 01-15-13