



Administrative Adjustment

Project Information

Property Address _____

Assessor's Parcel Number(s) _____

Please explain the intent of this request _____

Applicant Signature _____ Date _____

Owner Signature _____ Date _____

Applicant Information

Property Owner(s) _____

Mailing Address _____

Phone No _____ Email _____ Fax No _____

Applicant (if different than Owner) _____

Mailing Address _____

Phone No _____ Email _____ Fax No _____

Contact Person/Representative (if different than Owner) _____

Mailing Address _____

Phone No _____ Email _____ Fax No _____

Office Use Only		
Case No _____		Application Fee \$ _____
Date Received _____	Date of Issuance _____	Expiration Date _____
Received By _____		Planner _____

Checklist

Please use the following list to prepare your complete application. If any information is missing, inaccurate or incomplete, the application will be deemed invalid and **will not be** accepted for processing.

- Application fee of \$35 is due upon submittal.
- One (1) original signed application.
- One (1) original, current and fully signed Affidavit(s) plus one (1) copy.