



City of Austin Volume Builder Program Master Review Application

Section 1: Applicant Information

Volume Builder Business Name: _____

Contact Information of Applicant

- Name: _____
- Business Address: _____
- Business City: _____ State: _____ ZIP: _____
- Office Phone: _____
- Mobile Phone: _____
- Email Address: _____

Section 2: Project Information

Legal Recorded Name of Subdivision or Site Plan

AMANDA approved plat case number: _____

Section: _____

Phase: _____

Site Plan Case Number: _____

Approval Date: _____

Expiration Date: _____

Zoning District: _____

Has this project been approved for SMART Housing? _____

If yes, please attach the NHCD certification letter.

Does this project have an approved Chapter 245: _____

If yes, please attach the Chapter 245 Determination.

Section 3: Master home prototypes

	Plan number and name	Elevation options	Other options affecting the structure	Maximum square footage (all options)	PR number (if it was previously approved)	Date of last approval
1						
2						
3						
4						
5						
6						

Section 3 Continued: Attach additional sheets to submit 13 or more plans

	Plan number and name	Elevation options	Other options affecting the structure	Maximum square footage (all options)	PR number (if it was previously approved)	Date of last approval
7						
8						
9						
10						
11						
12						

Section 4: Acknowledgement

By signing this application, you agree to strictly adhere to the terms of the Volume Builder Program. You also acknowledge that we will perform random audits of Volume Builder permit applications. Should you repeatedly fail to comply with requirements, your registration may be cancelled for one year at the discretion of the Volume Builder Coordinator, and registration fees will not be refunded. In such case, your applications for permit will no longer be processed by the Volume Builder Program.

Signature

Date

Title