



Land Use Commission Site Plan Application

Non-Consolidated Land Use Element (A Plan)

DevelopmentATX.com | Phone: 311 (or 512-974-2000 outside Austin)
For submittal and fee information, see austintexas.gov/digitaldevelopment

PURPOSE: This application is for review of a Land Use Commission non-consolidated project. For the following information, please visit <http://www.austintexas.gov/page/land-use-applications#site>: See Land Use Commission Site Plan Overview and Review Procedures for site plan general information and review procedures; see Land Use Commission Site Plan Application Instructions for instructions on completing this application and submittal requirements.

This application is a fillable PDF that can be completed electronically. To ensure your information is saved, [click here to Save](#) the form to your computer, then open your copy and continue.

The Tab key may be used to navigate to each field; Shift + Tab moves to the previous field. The Enter key activates links, emails, and buttons. Use the Up & Down Arrow keys to scroll through drop-down lists and check boxes, and hit Enter to make a selection.

The application must be complete and accurate prior to submittal. ***If more space is required, please complete the last section as needed***, and check the Additional Space box at the top or end of this application.

All information is required (if applicable).

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Development Review Type: _____
Application Accepted By: _____
Application Type: _____
Case Manager: _____

Additional space was required to complete this application. I have completed the Additional Space section. (This check box is also at end of the application.)

Section 1: Project Information

Project Name: _____

Project Street Address (or range):

Zip: _____

Description of Proposed Development:

Provide either Legal Description or Subdivision Reference:

Legal Description:

Subdivision Reference

Name: _____

Block(s): _____ Lot(s): _____ Outlot: _____

Plat Book: _____ Page Number: _____

Document Number: _____ Case Number: _____

Deed Reference of Deed Conveying Property to the Present Owner

Volume: _____ Document Number: _____

Page(s): _____ Sq. Ft.: _____ or Acres: _____

Tax Parcel Number(s): _____

Section 2: Applicant/Agent Information

Applicant Name: _____

Firm: _____

Applicant Mailing Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone 1: _____ Type 1:

Phone 2: _____ Type 2: Phone 3: _____ Type 3:

Section 3: Owner Information

Same as Applicant Owner Name: _____

Owner Signature: _____

Firm: _____

Owner Mailing Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone 1: _____ Type 1:

Phone 2: _____ Type 2: Phone 3: _____ Type 3:

Section 4: Engineer Information

Not Applicable Same as Applicant Name: _____

Firm: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone 1: _____ Type 1:

Phone 2: _____ Type 2: Phone 3: _____ Type 3:

Section 5: Other Professional/Trade Information

Not Applicable Same as Applicant Type:

Name: _____

Firm: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone 1: _____ Type 1:

Phone 2: _____ Type 2: Phone 3: _____ Type 3:

Section 6: Property Attributes

Is this a S.M.A.R.T. Housing Project? Yes No (If Yes, submit a copy of the
Pre-Certification letter from Neighborhood Housing and Community Development.)

Smart Growth Zone -OR- Drinking Water Protection Zone

Watershed: Watershed Class:

In City of Austin Edwards Aquifer Recharge Zone? Yes No

Land Development Jurisdiction: Full-Purpose Limited-Purpose 2-Mile ETJ 5-Mile ETJ

Is your project subject to all current watershed protection regulations? Yes No

School District: _____

On a Hill Country Roadway? Yes No

Specify Hill Country Roadway: _____

Principal Street Type (Full-Purpose): Core Transit Corridor Urban Roadway

Internal Circulation Route Suburban Roadway Hill Country Roadway Highway

In a Neighborhood Plan? Yes No

If Yes, name of Neighborhood Plan: _____

In a Transit-Oriented Development (TOD) District, the North Burnet/Gateway (NBG), the East Riverside Corridor (ERC), or Other? Yes No

If Yes, name of TOD, NBG, ERC, or Other: _____

Is a Vertical Mixed Use building proposed? Yes No

(See Land Use Commission Site Plan Application Instructions for pre-submittal requirements.)

Electric Utility Provider: _____

Water Provider: _____

Wastewater Disposal Provider: _____

Section 7: Application Assessment

Large Retail Use, as defined in Sec. 25-2-813? Yes No

Is a Traffic Impact Analysis (TIA) required? Yes No (See Section 12: TIA Determination Worksheet.)

Is this use Conditional within the site's zoning district? Yes No

Has there been a Development Assessment? Yes No File Number: _____

Small Project? Yes No

If residential, are there other Tax Credits or State/Federal funding? Yes No

Will all parking be located on site? Yes No (If No, an Off-Site/Shared Parking Application and fees are required.)

Shared parking? Yes No (If Yes, an Off-Site/Shared Parking Application and fees are required.)

Section 8: Site Area Information

Gross Site Area: Acres _____ -OR- Sq. Ft. _____

Net Site Area: Acres _____ -OR- Sq. Ft. _____

Is Demolition proposed? _____ If Yes, how many residential units will be demolished? _____
 Number of these residential units currently occupied: _____ (If 5 or more, tenant notification may be required and a certified form may be required with your application per LDC 25-1-712.)
 Number of Newly Proposed Residential Units (if applicable): _____

<u>EXISTING ZONING</u>	<u>EXISTING USE</u>	<u>TRACT #</u>	<u>ACRES / SQ FT</u>	<u>PROPOSED USE</u>
_____	_____	_____	____ / _____	_____
_____	_____	_____	____ / _____	_____
_____	_____	_____	____ / _____	_____
_____	_____	_____	____ / _____	_____

Are any underground storage tanks existing or proposed? Yes No

Section 9: Related Cases

FILE NUMBERS

Zoning Case? Yes No _____
 Restrictive Covenant? Yes No _____
 Subdivision? Yes No _____
 Land Status Report? Yes No _____
 Existing Site Plan? Yes No _____

Section 10: Land Use Site Plan Data - as applicable

Subject to Compatibility Standards? Yes No
 In Combining District/Overlay Zone? (NCCD, CVC, WO, AO, etc.): Yes No
 If Yes, please specify: _____
 Requires a Green Building Program Rating? Yes No (If Yes, attach Letter of Intent.)

Section 11: Waiver / Variance / Etc. - as applicable

- Compatibility Standards Waiver - Section(s): _____
- Driveway Spacing - Section(s): _____
- Hill Country - Section(s): _____
- Waterfront Overlay District - Section(s): _____
- Environmental - Section(s): _____
- Shared Parking Analysis Off-Site or Remote Parking
- Detention Pond Waiver Alternative Landscape Compliance

Section 12: Traffic Impact Analysis (TIA) Determination Worksheet

Applicant must complete this worksheet.

Project Name: _____

Location: _____

Applicant: _____ Telephone No: _____

Application Status: Development Assessment Zoning Site Plan

EXISTING:

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Tract Number	Tract Acres	Bldg. Sq. Ft.	Zoning	Land Use	I.T.E. Code	Trip Rate	Trips Per Day

PROPOSED:

FOR OFFICE USE ONLY

Tract Number	Tract Acres	Bldg. Sq. Ft.	Zoning	Land Use	I.T.E. Code	Trip Rate	Trips Per Day

ABUTTING ROADWAYS:

FOR OFFICE USE ONLY

Street Name	Proposed Access?	Pavement Width	Classification

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A traffic impact analysis is required. The consultant preparing the study must meet with a Transportation planner to discuss the scope and requirements of the study before beginning the study.

A traffic impact analysis is NOT required. The traffic generated by the proposal does not exceed the thresholds established in the City of Austin Land Development Code.

The traffic impact analysis has been waived for the following reason:

A neighborhood traffic analysis will be performed by the City for this project. The applicant may have to collect existing traffic counts. See a Transportation planner for information.

Reviewed By: _____ Date: _____

Distribution: File Cap. Metro TxDOT DSD Travis Co. ATD Total Copies: _____

NOTE: A TIA Determination must be made prior to submittal of any Zoning or Site Plan application, therefore, this completed and reviewed worksheet MUST ACCOMPANY any subsequent application for the IDENTICAL project. CHANGES to the proposed project will REQUIRE a new TIA Determination.

Section 13: Submittal Verification

My signature attests to the fact that the attached application package is complete and accurate to the best of my knowledge. I understand that proper City staff review of this application is dependent upon the accuracy of the information provided and that any inaccurate or inadequate information provided by me/my firm/etc., may delay the proper review of this application.

Please type or print Name below Signature, and indicate Firm represented, if applicable:

Signature

Month

Day

Year

Name (Typed or Printed)

Firm

Section 14: Inspection Authorization

As owner or authorized agent, my signature authorizes staff to visit and inspect the property for which this application is being submitted.

Please type or print Name below Signature, and indicate Firm represented, if applicable:

Signature

Month

Day

Year

Name (Typed or Printed)

Firm

Section 15: Acknowledgment Form

I, _____ have checked for any information that may
(Printed Name of Applicant)

affect the review of this project, including but not limited to: subdivision plat notes, deed notes, deed restrictions, restrictive covenants, zoning conditional overlays, and/or Subchapter E design standards prohibiting certain uses and/or requiring certain development restrictions (height, access, screening, etc.) on this property, located at:

(Address or Legal Description):

If a conflict should result with the request I am submitting to the City of Austin due to any of the aforementioned information, it will be my responsibility to resolve it. I also acknowledge that I understand the implications of use and/or development restrictions that are a result of the aforementioned information.

I understand that if requested I must provide copies of any and all of the aforementioned information that may apply to this property.

Applicant's Signature

Month

Day

Year

For Submittal Requirements and Exhibits

Please see Land Use Commission Site Plan Application Instructions at
<http://www.austintexas.gov/page/land-use-applications#site>



City Arborist Review Addendum for Commercial Subdivision and Site Plan Submittals

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File Number: _____ Date Issued: _____
Application Accepted By: _____ Date: _____

Section 1: Project Information

Application type: Single Family Subdivision Commercial Subdivision/Site Plan
Project Name: _____
Project Street Address: _____

Section 2: City Arborist Review

Has there been an onsite consultation with a City Arborist? Yes No

(If yes, please include all consultation correspondence and documents.)

Consultation – Tree Permit Number: _____

For single-family subdivision applications in the full- and limited-purpose jurisdictions:

- Number of trees with a diameter of 19 in. or greater located within the LOC: _____
- Number of trees with a diameter of 19 in. or greater located immediately adjacent to the LOC: _____
- Total number of trees with a diameter of 19 in. or greater: _____

For commercial subdivision and site-plan applications in the full- and limited-purpose jurisdictions:

- Number of trees with a diameter of 8 in. or greater located within the LOC: _____
- Number of trees with a diameter of 8 in. or greater located immediately adjacent to the LOC: _____
- Total number of trees with a diameter of 8 in. or greater: _____