



**CITY OF NEW ALBANY, INDIANA**  
**DEPARTMENT OF COMMUNITY DEVELOPMENT**  
**NEW ALBANY CITY PLAN COMMISSION**  
**NEW ALBANY BOARD OF ZONING APPEALS**  
**SCOTT WOOD, DIRECTOR**

Jeff M. Gahan, Mayor

## **SITE PLAN APPLICATION REQUIREMENTS**

**Fee: \$100.00**

In order for the staff of the New Albany City Plan Commission to expedite your request in a timely fashion, we ask that you follow these requirements:

1. The application and supporting materials must be submitted before the appropriate meeting deadline. **No exceptions.**
2. Once the application has been submitted with the required application processing fee, the staff will review the application at the next staff meeting (every Wednesday at 3:00 p.m.) to verify that all the required items in the checklist have been included. All items on the checklist provided must be submitted with the application or the request will not be assigned a Docket number. If items are missing, the applicant will be notified of the deficiency and the application will be held until the following month's meeting to allow the applicant time to submit those materials. If the applicant fails to submit the required items prior to the second deadline, a new application, including a new fee, will need to be submitted.
3. When the application is deemed complete by the staff, the request will be assigned a Docket number and will be placed on the appropriate agenda, and the applicant will be notified of that fact. At that time, the remaining application fee will be due, and the public hearing signs will be issued (as applicable).

**All Fees Are  
NON- REFUNDABLE**

Application Number \_\_\_\_\_

Docket Number \_\_\_\_\_



## REQUEST FOR SITE PLAN REVIEW

Docket Number: \_\_\_\_\_ Date Filed: \_\_\_\_\_

Address of Site Plan Review: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Any Previous Dockets for this address? If yes, please list. \_\_\_\_\_

Engineer/Architect: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Owner of Property: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Description of Project:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

\_\_\_\_\_ **\*\*Office Use Only — Do Not Write Below This Line\*\*** \_\_\_\_\_

Site plans submitted: \_\_\_\_\_

Request taken by: \_\_\_\_\_

The property is zoned: \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Date reviewed: \_\_\_\_\_

Meeting date: \_\_\_\_\_

Please check: Approved \_\_\_\_\_ Denied \_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_

City Plan Commission/Board of Zoning Appeals  
311 Hauss Square, Suite 329  
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812.948.5333