



5-DAY REVIEW APPLICATION
Subdivision and Land Study

DATE: _____

FILE NO. _____

Type of Application (Select One):

- Amending
 Major Preliminary
 Major Final
 Major Combination
 Minor
 Resubdivision Preliminary
 Resubdivision Final
 Resubdivision Combination
 Land Study

SUBDIVISION or LAND STUDY NAME: _____

1. Property Legal Description (Tract, Block, Grant, etc.)

2. Property Land Uses:

	<u>ACRES</u>	<u>SITES</u>		<u>ACRES</u>	<u>SITES</u>
Single-family	_____	_____	Office	_____	_____
Duplex	_____	_____	Street & Alley	_____	_____
Apartment	_____	_____	Ponding & Drainage	_____	_____
Mobile Home	_____	_____	Institutional	_____	_____
P.U.D.	_____	_____	Other (specify below)	_____	_____
Park	_____	_____	_____	_____	_____
School	_____	_____	_____	_____	_____
Commercial	_____	_____	Total No. Sites	_____	_____
Industrial	_____	_____	Total (Gross) Acreage	_____	_____

3. What is existing zoning of the above described property? _____ Proposed zoning? _____

4. Will the residential sites, as proposed, permit development in full compliance with all zoning requirements of the existing residential zone(s)? Yes No

5. What type of utility easements are proposed: Underground Overhead Combination of Both

6. What type of drainage is proposed? (If applicable, list more than one)

7. Are special public improvements proposed in connection with development? Yes No

8. Is a modification or exception of any portion of the Subdivision Ordinance proposed? Yes No
If answer is "Yes", please explain the nature of the modification or exception _____

9. Remarks and/or explanation of special circumstances: _____

10. Improvement Plans submitted? Yes No

11. Will the proposed subdivision require the city to review and decide whether this application is subject to the standards in effect prior to the effective date of the current applicable standards? Yes No
If yes, please submit a vested rights petition in accordance with Title I (General Provisions) Chapter 1.04 - Vested Rights

Owner of record _____
(Name & Address, Zip) (Email) (Phone)

Developer _____
(Name & Address, Zip) (Email) (Phone)

Engineer _____
(Name & Address, Zip) (Email) (Phone)

REPRESENTATIVE CONTACT (PHONE): _____

REPRESENTATIVE CONTACT (E-MAIL): _____

NOTE: SUBMITTAL OF AN APPLICATION DOES NOT CONSTITUTE ACCEPTANCE FOR PROCESSING
UNTIL THE PLANNING DEPARTMENT REVIEWS THE APPLICATION FOR ACCURACY AND
COMPLETENESS.

REQUIRED DOCUMENTATION FOR 5-DAY REVIEW APPLICATION

The purpose of a 5-day review request is to assure that the subdivision application is consistent with all standards of the Subdivision Code, and to provide to the applicant a determination of completeness. If the application is determined to be incomplete, the notification shall specify the documents or other information needed to complete the application prior to the submittal of a paid application.

REQUIREMENTS:

- APPLICATION** – Each item on this application shall be completed and all documentation required on this form shall be submitted before this application is accepted for processing. Submittal of an application does not constitute acceptance for processing until the Department reviews the application for accuracy and completeness.
- RELEVANT PLATS OR LAND STUDY** – Include one (1) digital copy of your preliminary and final plats.
- RIGHT-OF-WAY AND EASEMENT VACATION AND DEDICATION** - Include a survey and metes & bounds of the portion to be vacated, to include sq. ft. of the area.
- A copy of the original subdivision.

The following items shall be submitted when applicable.

- VESTING APPLICATION** – Required when the applicant requests that the application be subject to standards in effect prior to the effective date of the current applicable standards (No. 11 on application). A vested rights petition in accordance with Section 1.04.070 – *Vesting of projects* shall be submitted.
- WAIVERS, EXCEPTIONS OR MODIFICATIONS** – Required when any development standard deviates from or does not comply with code regulations.

SUBMITTAL OPTIONS:

- CITIZEN ACCESS PORTAL** – <https://aca-prod.accela.com/ELPASO/Default.aspx>
- ONE-STOP-SHOP (OSS)** – In person at 811 Texas Ave. El Paso, TX 79901 - if submitting application in person, mail, or e-mail a \$24.00 applicable tech fee will apply.