Print Form

City of Englewood
Community Development Department

Temporary Use

Temporary Use

DATA SUMMARY

SITE ADDRESS:_____

LEGAL DESCRIPTION: Lots:_____ Block _____Subdivision_____

ZONING:_____ **PRESENT USE:**_____

COUNCIL DISTRICT:_____

REQUEST:_____

_____

_____

_____

_____

PROPERTY OWNER INFORMATION:

Name:_____
Company:_____
Address:_____
_____
Telephone Number:_____
Fax Number:_____
Email Address:_____

_____
Signature of Owner

_____
Printed Name (Owner)

APPLICANT INFORMATION:

Name:_____
Company:_____
Address:_____
_____
Telephone Number:_____
Fax Number:_____
Email Address:_____

_____
Signature of Applicant

_____
Printed Name (Applicant)

Staff Use Only

Date Received:_____Time:_____
Application Received By:_____
Application Fee:_____
Planner Assigned:_____

Case Number:_____
DRT Date:_____
Hearing Date:_____
Posting Date:_____