

CITY OF LA PORTE  
LA PORTE, IN 46350  
801 MICHIGAN AVE.

219.362.8260  
FAX 325.0656

[www.cityoflaporte.com/sitereview](http://www.cityoflaporte.com/sitereview)  
[aklinger@cityoflaportein.gov](mailto:aklinger@cityoflaportein.gov)

Date Received: \_\_\_\_\_

Payment Received: \_\_\_\_\_

Receipt #: \_\_\_\_\_

Review Date: \_\_\_\_\_

## APPLICATION FOR SITE REVIEW

Completed application must be submitted via email in PDF format to Amy Klinger at [aklinger@cityoflaportein.gov](mailto:aklinger@cityoflaportein.gov) or in person at the Department of Community Development & Planning. Eight sets of project drawings or site plans must be submitted with the application. Emailed project PDFs are accepted in lieu of prints for an additional fee of \$20.00. **Application must be received five (5) working days prior to the meeting for which review is sought.** Site Review convenes every Wednesday at 9:00 am on first-come-first-served basis. For more information call 219.362.8260, or email [aklinger@cityoflaportein.gov](mailto:aklinger@cityoflaportein.gov), or go to [cityoflaporte.com/sitereview](http://cityoflaporte.com/sitereview).

Be advised, it may become necessary to seek additional assistance from a registered surveyor, land planner, professional engineer or real estate attorney. You will be responsible for any additional costs that these services require.

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Proposed Project Address: \_\_\_\_\_

Project Name: \_\_\_\_\_ Business Name: \_\_\_\_\_

Applicant's Relationship to Project: \_\_\_\_\_

Company: \_\_\_\_\_ Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

### Developer Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Office/Cell#: \_\_\_\_\_

### Property Owner Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Office/Cell #: \_\_\_\_\_

Description of Proposed Project: \_\_\_\_\_

\_\_\_\_\_

Has this proposed project been presented to the Site Review Committee before? \_\_\_\_\_ If yes, when? \_\_\_\_\_

Has any element of the project changed since initial presentation? \_\_\_\_\_ Has any contact information changed? \_\_\_\_\_

If yes, what changes have taken place?: \_\_\_\_\_

\_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **Submittal Material and Requirements:**

- Completed and Signed Site Plan Review Application.
- 8 copies of the Site Plan

## **Acknowledgment of Terms**

I, the applicant, as a representative for the aforementioned project, acknowledge the application requirements as outlined above, and understand the application will be held until proper receipt of complete application and application fee. Upon receipt of the application and required materials, the application will be processed and I, the applicant, will be notified of the date and time of the review of the project as submitted. I, the applicant, do also understand Site Reviews expire after a period of one year from date of presentation.

\_\_\_\_\_  
Applicant

