DESIGN REVIEW

Application Requirements

All application materials must be submitted in print and electronic format, on disk or via email to planning@lawrenceks.org. If you are unable to provide the application materials in electronic format, please contact the Planning Office at 785-832-3150.

GENERAL REQUIREMENTS

☐ Application Be sure to note if other applications (site plans, variance requests, Tax Credit Application, etc.) have been or will be submitted. Make sure the application is signed and dated. Include a digital copy of the signed application and supporting materials.

☐ Written Description Describe clearly and in detail the nature of your project. Include exact dimensions for materials to be used (e.g. width of siding, window trim, etc.) Attach additional documents and pages as necessary.

☐ Drawings Submitted drawings must be sufficiently clear, detailed and dimensioned in order to adequately communicate the scope of the proposed project. The applicant should include dimensional drawings with a graphic/bar scale of each affected elevation and floor plans of the structure. Staff may require more information based on submission and scope of the project. Applicants should submit one full size copy of the plans in addition to the digital plans.

☐ Site Plan Scaled or dimensioned site plan with a graphic/bar scale. Include location of all existing and proposed structures, and landscape features such as retaining walls, historic limestone curbing, hitching posts, etc.

☐ Description of Materials and Construction Techniques This may be noted on the required drawings or described on page 2 of the Application. Please note window and door specifications if proposing replacement.

☐ Photographs Include photographs of each elevation of the property and any important architectural details. The property owner will allow staff access to the property to photo document the project. Please submit digital photographs only.

ADDITIONAL REQUIREMENTS FOR DEMOLITION PROJECTS

☐ Statement of Building Condition Structural analysis completed by an engineer or licensed building contractor thoroughly documenting the specific structural deficiencies that require the structure to be demolished.

☐ Repair vs. Replacement Cost Analysis Analysis describing the cost to repair the structure to be demolished and the cost to build a new structure of equal size and materials. This information will help to determine the feasibility of rehabilitation.
DESIGN REVIEW APPLICATION

PROPERTY INFORMATION

Address of Property ____________________________________________

Legal Description (may be attached) __________________________________

OWNER INFORMATION

Name(s) ________________________________________________________

Contact _______________________________________________________

Address _______________________________________________________

City_________________________ State ___________ ZIP

Phone (____) __________________________ Fax (____)

E-mail ___________________________ Cell Phone (____) ____________

APPLICANT/AGENT INFORMATION

Contact _______________________________________________________

Company ______________________________________________________

Address _______________________________________________________

City_________________________ State ___________ ZIP

Phone (____) __________________________ Fax (____)

E-mail ___________________________ Cell Phone (____) ____________

<table>
<thead>
<tr>
<th>Existing Zoning</th>
<th>Existing Land Use</th>
<th>Proposed Land Use</th>
<th># of Buildings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total site area</td>
<td>Existing Building Footprint</td>
<td>Proposed Building Footprint</td>
<td>Open Space Area</td>
</tr>
<tr>
<td>Existing Pavement Coverage</td>
<td>Proposed Pavement Coverage</td>
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</tbody>
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Are you also submitting any of the following applications?

- Building Permit
- Site Plan
- Special Use Permit
- Zoning Change
- Variance
- State or Federal Tax Credit Application
- Other (specify)
Property Address:______________________________________________________________

Detailed Description of Proposed Project:  
(Attach additional sheets if necessary)

Reason for Request:  
(Attach additional sheets if necessary)
Architect/Engineer/Contractor Information: Please provide name and phone number of any persons associated with the project.

Contact

Company

Address

City State ZIP

Phone (__) Fax (____)

E-mail Cell (__) ________________________

REQUIRED ATTACHMENTS:

☐ Photographs of existing structure and site

☐ Scaled or dimensioned site plan with a graphic/bar scale

☐ Scaled elevation drawings with a graphic/bar scale

☐ Scaled or dimensioned floor plans with a graphic/bar scale

☐ Materials list

☐ Digital copy of application materials

ADDITIONAL INFORMATION MAY BE REQUIRED BASED ON THE SCOPE OF THE PROJECT

SIGNATURE

I/We, the undersigned am/are the (owner(s)), (duly authorized agent), (Circle One) of the aforementioned property. By execution of my/our signature, I/we do hereby officially apply for design review approval as indicated above.

Signature(s): ________________________________ Date __________________

________________________________________ Date __________________

________________________________________ Date __________________

Note: If signing by agent submit Owner Authorization Form
OWNER AUTHORIZATION

I/WE ____________________________________________________________, hereby referred to as the “Undersigned”, being of lawful age, do hereby on this _______day of __________, 20 __, make the following statements to wit:

1. I/We the Undersigned, on the date first above written, am/are the lawful owner(s) in fee simple absolute of the following described real property:

   See “Exhibit A, Legal Description” attached hereto and incorporated herein by reference.

2. I/We the undersigned, have previously authorized and hereby authorize (Herein referred to as “Applicant”), to act on my/our behalf for the purpose of making application with the Planning Office of Lawrence/Douglas County, Kansas, regarding _______ (common address), the subject property, or portion thereof. Such authorization includes, but is not limited to, all acts or things whatsoever necessarily required of Applicant in the application process.

3. It is understood that in the event the Undersigned is a corporation or partnership then the individual whose signature appears below for and on behalf of the corporation or partnership has in fact the authority to so bind the corporation or partnership to the terms and statements contained within this instrument.

IN WITNESS THEREOF, I, the Undersigned, have set my hand and seal below.

__________________________________  ____________________________________
Owner                                    Owner

STATE OF KANSAS
COUNTY OF DOUGLAS

The foregoing instrument was acknowledged before me on this ______ day of ________, 20 __, by ________________________________________________.

My Commission Expires: ________________________________
                              Notary Public