
PREDEVELOPMENT MEETING APPLICATION

CHECKLIST PRIOR TO SUBMITTAL

1. Complete application
2. Current Title Report, issued no longer than 30 days from date of application submittal
3. Alta Survey, including all easements and exclusion documentation
4. Cover Letter describing the proposed project and proposed project timeline
5. Preliminary scaled site plan showing the following information:
 - a. The entire parcel of the proposed project, plus all abutting parcels, existing development, and all roads (public or private)
 - b. Exact location and dimensions of proposed building(s) and/or infrastructure
 - c. Location of all parking and landscaped areas
 - d. Location and dimensions of waste container enclosure(s)
 - e. Location of fences
 - f. Location of signs
 - g. Location of street lighting and site lighting
6. Preliminary scaled civil site plan showing the proposed location of all utilities, public infrastructure and drainage using Low Impact Design (LID).
7. Preliminary design schematic of each proposed building elevation, including exterior materials and colors
8. Preliminary scaled interior floor plan and dimensions for each building. The proposed use of each room must be labeled

**** ONLY COMPLETE APPLICATIONS WILL BE ACCEPTED ****

**ALL APPLICATIONS MUST BE SUBMITTED VIA HARD COPY. ALL PLANS SHALL BE
PRINTED ON 24 X 36" PAPER + PDF DIGITAL COPY.**

Submitting an application does not guarantee placement in a predevelopment meeting. Once a complete application is submitted, South Salt Lake staff will notify applicant of predevelopment status. If approved, a predevelopment meeting will be scheduled within 30 days.



1. PROPOSED LOCATION OF DEVELOPMENT

ADDRESS	SUITE/UNIT	CITY	STATE	ZIP
PARCEL ID				

2. PROJECT SUMMARY

CHANGE OF CURRENT BUILDING USE: YES NO

TENANT FINISH OR BUILDING REMODEL: YES NO

NEW BUILDING CONSTRUCTION: YES NO

HANDLING HAZARDOUS MATERIALS: YES NO

FIRE SPRINKLERS: YES NO

TOTAL ACRES: _____

EXISTING ZONING: _____

3. CONTACT INFORMATION

NAME OF PROPERTY OWNER	ADDRESS		
	CITY	STATE	ZIP
TELEPHONE	EMAIL		
APPLICANT NAME	TELEPHONE		
	EMAIL		
	REPRESENTING: <input type="checkbox"/> OWNER <input type="checkbox"/> TENANT <input type="checkbox"/> PURCHASING PROPERTY <input type="checkbox"/> OTHER: _____		

Signature: _____ **Print Name:** _____ **Date:** _____

-----FOR CITY USE ONLY-----

Staff Assigned: _____

Application Date: _____

Comments: _____