

SITE PLAN PROCESSING FORM
FOR
NON-RESIDENTIAL SITE PLANS

| | |
|--|---------------|
| | Site Plan No. |
| DO NOT COMPLETE – OFFICE USE ONLY | |
| Date Filed | |
| Fee Paid | |
| Received By (signature) | |
| Date Filed with Zoning Administrator | |

| | |
|---|-------|
| ACTION OF PLANNING COMMISSION | |
| DATE | |
| SIGNATURE OF CHAIRPERSON | |
| A. APPROVAL | |
| B. DISAPPROVAL | |
| C. CONDITIONAL APPROVAL | |
| The following conditions must be met for approval: | |
| | |
| REVISED SITE PLAN SUBMITTED TO ZONING ADMINISTRATOR (after conditional approval of the Planning Commission) | |
| | Date: |
| Revised Site Plan Approved | Date: |
| Signature of Zoning Administrator: | |