

# Project Application

fillable PDF available online at:  
[www.sedonaaz.gov/projects](http://www.sedonaaz.gov/projects)



**City Of Sedona**

**Community Development Department**

102 Roadrunner Drive Sedona, AZ 86336  
 (928) 282-1154 • [www.sedonaaz.gov/cd](http://www.sedonaaz.gov/cd)

Application for (check all that apply):

- |   |   |                                      |   |
|---|---|--------------------------------------|---|
| <input type="checkbox"/> Conceptual Review Preliminary Plat | <input type="checkbox"/> Comprehensive Review   | <input type="checkbox"/> Appeal      | <input type="checkbox"/> Time Extension     |
| <input type="checkbox"/> Community Plan Amendment           | <input type="checkbox"/> Development Review     | <input type="checkbox"/> Subdivision | <input type="checkbox"/> Minor Modification |
| <input type="checkbox"/> Zone Change                        | <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Variance    |   |

Project Information	Project Name			
	Project Address		Parcel No. (APN)	
	Primary Contact		Primary Phone	
	Email		Alt. Phone	
	Address		City/State/ZIP	
Office Use Only	<i>Application No</i>		<i>Date Received</i>	
	<i>Received by</i>		<i>Fee Paid</i>	

Project Description	
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Additional Contact Information: Please complete the following for all companies/people authorized to discuss the project with the City. Please attach additional sheets if necessary.

Contact #1	Company		Contact Name	
	Project Role		Primary Phone	
	Email		Alt. Phone	
	Address		City/State/ZIP	
Contact #2	Company		Contact Name	
	Project Role		Primary Phone	
	Email		Alt. Phone	
	Address		City/State/ZIP	
Contact #3	Company		Contact Name	
	Project Role		Primary Phone	
	Email		Alt. Phone	
	Address		City/State/ZIP	