CITY OF SPRINGDALE, OHIO
SPRINGDALE BUILDING DEPARTMENT
11700 SPRINGFIELD PIKE SPRINGDALE, OHIO 45246
TELEPHONE: (513) 346-5730

SUBMISSION REQUIREMENTS AND INSTRUCTIONS FOR
CONCEPT PLAN REVIEW

An application for Concept Plan Review submitted to the office of the City of Springdale Building Department must comply with the requirements and procedures outlined herein.

This packet contains a checklist of general, written, and graphic requirements, and application submittal forms which explain the Plan Review process. The checklist, together with all required information and application forms, must be submitted (originals) in complete and accurate form before the amendment will be processed by the Building Department.

The filing date of the application packet shall be the date on which all information submitted is examined by the Building Department and found to meet all the requirements as described in this packet. The schedule below lists the closing dates for the filing of applications and corresponding hearing dates for each cycle. The closing date represents the final day on which an application will be accepted. **After the closing date, the applicant cannot modify any portion of the information submitted unless specifically requested by the staff, or the Planning Commission. Early submission is therefore, highly recommended to assure placement on the agenda and adequate time for revisions and corrections.**

2016 -2017 CLOSING DATES AND SCHEDULES OF MEETINGS

DUE DATE	PLANNING COMMISSION MEETING
September 12, 2016	October 11, 2016
October 10, 2016	November 8, 2016
November 14, 2016	December 13, 2016
December 12, 2016	January 10, 2017
January 16, 2017	February 14, 2017
February 13, 2017	March 14, 2017
March 13, 2017	April 11, 2017
April 10, 2017	May 9, 2017
May 15, 2017	June 13, 2017
June 12, 2017	July 11, 2017
July 10, 2017	August 8, 2017
August 14, 2017	September 12, 2017
September 11, 2017	October 10, 2017
October 16, 2017	November 14, 2017
November 13, 2017	December 12, 2017

NOTE: THE APPLICANT OR A REPRESENTATIVE WILL BE EXPECTED TO BE IN ATTENDANCE ON THE SCHEDULED MEETING DATE AT 7:00 P.M. IN THE CITY COUNCIL CHAMBERS AT THIS ADDRESS UNLESS ADVISED OTHERWISE BY THE BUILDING DEPARTMENT

11/30/16

SUBMISSION REQUIREMENTS
FOR CONCEPT PLAN REVIEW
CITY OF SPRINGDALE ZONING CODE

FOR CITY OF SPRINGDALE BUILDING DEPARTMENT USE ONLY:

CASE # _____ DATE RECEIVED: _____

1. GENERAL REQUIREMENTS

___ 1.1 SUBMISSION CLOSING DATE (DATE: ___/___/___)

The application packet must be submitted to the office of the City of Springdale Building Department in person, no later than the due date. Prior to submitting the application packet and necessary information, the applicant should revise proposed plans and/or zoning plat as advised by the Building Official. After the closing date, the applicant cannot modify any portion of the information submitted unless specifically requested by the staff or Planning Commission. Early submission is recommended to assure placement on the agenda and adequate time for revisions and corrections. **Incomplete or inaccurate applications will not be accepted for processing or be placed on the agenda for any hearings or meetings.**

___ 1.2 APPLICATION FEE ($300.00 - MAKE CHECK PAYABLE TO CITY OF SPRINGDALE)

An application for a Concept Plan Review shall be accompanied by the above fee.

Cancellations of the Development Plan application must be submitted to the Building Department in writing. Fees are not refundable after the required submittal due date.

2. WRITTEN REQUIREMENTS

___ 2.1 PROPERTY DEED

Submit one (1) copy of the deed to the subject property as filed in the Hamilton County Recorderôs Office.

___ 2.2 CONCEPT REVIEW APPLICATION FORM

Complete and submit the original and one (1) copy of the application form.

___ 2.3 OWNERôS AFFIDAVIT

___ 2.4. TRAFFIC STUDY

If the proposed development will generate more than 100 trips in a peak hour period, a traffic impact analysis shall be required identifying existing roadway capacity, trips to be generated by the proposed development, anticipated impact of the proposed development on the existing roadway network and what improvements are necessary to mitigate any impact the development may have; and

___ 2.5 CHECKLIST OF REQUIREMENTS

Submit this checklist fully completed.

3. GRAPHIC REQUIREMENTS

___ 3.1 CONCEPT DEVELOPMENT PLAN - This checklist represents those plan requirements necessary for development plan approval**. Concept plans may contain any or all of the details listed below**. Please check those items included in the Concept Plan

Concept Development Plan (a drawing at a scale of fifty feet to the inch or larger - unless otherwise approved by the director) showing the items listed below:

___ A. Name of project, date, scale, north arrow (north shall be top of plan), map title (Development Plan), total number of sheets and sheet number;

___ B. Name and address of applicant, present owner, person/firm preparing the plans etc.;

___ C. Vicinity map that identifies the site with reference to surrounding areas and to existing street locations;

___ D. Summary table indicating existing and proposed uses of facilities, proposed parking spaces, parking spaces required by the Zoning Code, floor areas, density and seating capacity (where applicable);

___ E. Area of entire site, site (net) area excluding streets and right-of-ways;

___ F. Existing property lines, right-of-way and utility easements for the entire tract and each parcel involved;

___ G. Location of existing property lines and zone boundary lines of subject property and 200 feet outside subject site;

___H. Existing contour lines (dashed) at two (2) foot intervals or less on site and including 200 feet beyond, indicate source and date of data;

___ I. Front, side, and rear yard setbacks for all structures and parking areas;

___ J. The use and approximate location of existing pavements, sanitary and storm sewers, sidewalks and curbs, trees and landscape features and other physical and natural features; structures to be demolished shown in dashed lines and existing structures within 200 feet;

___ K. Highways and streets in the vicinity of the tract, and ingress and egress to the tract; and tracts adjacent to and across any street;

___ L. Proposed general location of buildings, parking areas, open spaces, signage, waste receptacles and landscape areas;

___ M. Proposed density levels for residential areas and/or acreage/square footage of business uses;

___ N. Proposed treatment of existing topography, drainage ways and tree cover;

___ O. Proposed general location of major vehicular and pedestrian circulation, showing how this circulation pattern relates to the primary and secondary road alignments designated on the City of Springdale Thoroughfare Plan;

___ P. Portion of property, in acreage and percentage, to be developed as impervious surface;

___ Q. Specific engineering plans, including site grading showing all site features and finished grading for public and private lands within the development area, street improvements, sidewalks, drainage and utility improvements, and extensions as necessary;

___ R. Landscaping plans, including quantity, size and varieties of landscaping;

___ S. Photometric lighting plan extending 20ô beyond subject property lines including cut sheet details of fixture and pole;

___ T. Preliminary building plans, including floor plans, elevations and building materials;

___ U. Signage Plan indicating location, height, size illumination, and materials.

___ V. Tree Survey and Tree Removal Plan.

___ W. Such other relevant information as the Planning Commission may require.

3.2 REDUCED CONCEPT DEVELOPMENT PLAN

Concept Development Plan reduced to an 11ò x 17ò sheet of paper. The information contained on the reduced version shall be the same as is required above.

____ 3.3 NUMBER OF COPIES OF CONCEPT DEVELOPMENT PLANS

The applicant shall submit three (3) copies of the Concept Development Plan and one (1) digital copy of the Concept Development Plan for City Staff review. After initial review by City Staff, the applicant shall submit three (3) copies of the Concept Development Plan, one (1) digital copy and fourteen (14) Reduced (11x17) copies of the Concept Development Plan for final review and distribution to Planning Commissioners on or before the date advised by the Building Official.

INFORMATION SUBMITTED SHALL BE ASSUMED TO BE CORRECT AND APPLICANT AND/OR AGENT SHALL ASSUME RESPONSIBILITY FOR ANY ERRORS AND/OR INACCURACIES RESULTING IN AN IMPROPER APPLICATION.

_____

Signature of person preparing this checklist Date Submitted
(Applicant or Representative)

APPLICATION FOR CONCEPT PLAN REVIEW
CITY OF SPRINGDALE BUILDING DEPARTMENT
11700 SPRINGFIELD PIKE SPRINGDALE, OHIO 45246
TELEPHONE: (513) 346-5730

FOR CITY OF SPRINGDALE BUILDING DEPARTMENT USE ONLY:

CASE # _____ DATE RECEIVED: _____

FEE RECEIPT #_____ RECEIVED BY: _____

NOTE: THIS APPLICATION MUST BE TYPEWRITTEN OR NEATLY PRINTED - USE ADDITIONAL SHEETS IF NECESSARY

NAME OF APPLICANT _____

ADDRESS _____ PHONE NO. _____

CITY/STATE/ZIP _____EMAIL _____

NAME, ADDRESS & AUDITORõS PARCEL ID NUMBER OF EACH PROPERTY OWNER OF RECORD WITHIN THE PROPERTY WHICH IS REQUESTED FOR CONCEPT PLAN REVIEW:

1. _____
2. _____

EXISTING ZONING OF PROPERTY: _____

BRIEF DESCRIPTION OF REQUEST: _____

_____

_____

(MY) (OUR) INTEREST IN THE SUBJECT PROPERTY IS:

OWNER _____ AGENT _____ LESSEE _____ OPTIONEE _____

APPLICANT _____
Signature Address Phone Fax

OWNER(S) _____

_____
Signature Address Phone Number

OWNER'S AFFIDAVIT

STATE OF OHIO, COUNTY OF HAMILTON

I (we) _____
hereby certify that we are all of the owners of the real estate which is the subject of the Concept Plan Review; that we hereby consent to the Planning Commission of the City of Springdale reviewing my/our application for the subject real estate. We understand that our application will be considered and processed in accordance with the regulations as set forth by the City of Springdale Building Department and Zoning Code; that we agree to accept, fulfill and abide by those regulations. The statements and attached exhibits are in all respects true and correct to the best of my/our knowledge and belief. Further, I understand that I am responsible for the review costs incurred by the City as described more specifically in Section 1.2 of the Checklist.

_____
Signature

_____
Mailing Address

_____
City and State

_____
Phone

Subscribed and sworn to before me this _____ day of _____ 20___

_____
Notary Public

Person to be contacted for details, other than signatory:

_____
Name Address Phone