



## DEVELOPMENT APPLICATION

### PROJECT INFORMATION

Title:

Project Address:

Description:

Check all application types, if applicable:

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Administrative Deviation ... \$25</li> <li><input type="checkbox"/> Administrative Wireless Telecom ... \$250</li> <li><input type="checkbox"/> Encroachment Permit ... \$25</li> <li><input type="checkbox"/> Temporary Use Permit ... \$25</li> <li><input type="checkbox"/> Comprehensive Plan Adoption &amp; Amendment*... \$250</li> <li><input type="checkbox"/> Conditional Use Permit* ... \$300</li> <li><input type="checkbox"/> County Landmark or Historic District Adoption/Amendment* ... \$250</li> <li><input type="checkbox"/> Development Plan* ... \$500</li> <li><input type="checkbox"/> Major Development Plan Amendment* ... \$500</li> <li><input type="checkbox"/> Minor Development Plan Amendment ... \$250</li> <li><input type="checkbox"/> Summary Plat... \$100 plus \$25 lot; \$10 / acre for non-residential</li> <li><input type="checkbox"/> Sketch Plat, Subdivision*... \$250 plus<br/>\$175/lot (1-10 lots)<br/>\$125/lot (11-30 lots)<br/>\$75/lot (30+ lots)</li> <li><input type="checkbox"/> Preliminary Plat, Subdivision* ... \$250 plus<br/>\$175/lot (1-10 lots)<br/>\$125/lot (11-30 lots)<br/>\$75/lot (30+ lots)</li> <li><input type="checkbox"/> Final Plat, Subdivision* ... \$250 plus<br/>\$175/lot (1-10 lots)<br/>\$125/lot (11-30 lots)<br/>\$75/lot (30+ lots)</li> <li><input type="checkbox"/> Landscaping Plan ...\$500</li> <li><input type="checkbox"/> Lighting Plan ...\$500</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Site Plan* ... \$500 plus<br/>\$75 per/Million \$ estimated construction cost</li> </ul> <p><b>Estimated Construction Cost:</b> _____</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Major Site Plan Amendment* ... \$500</li> <li><input type="checkbox"/> Minor Site Plan Amendment ... \$250</li> <li><input type="checkbox"/> Major Zone Map Amendment* ... \$150<br/><i>No fee if initiated by County Council or County Manager</i></li> <li><input type="checkbox"/> Minor Zone Map Amendment* ... \$150<br/><i>No fee if initiated by County Council or County Manager</i></li> <li><input type="checkbox"/> Master Plans* (Major, Minor) ...\$250</li> <li><input type="checkbox"/> Text Amendment* ... \$150<br/><i>No fee if initiated by County Council or County Manager</i></li> <li><input type="checkbox"/> Variance ... \$250<br/><i>No fee if application is a part of a Site Plan review</i></li> <li><input type="checkbox"/> Administrative Wireless Telecommunication Facility ... \$250</li> <li><input type="checkbox"/> Discretionary Wireless Telecommunication Facility* ... \$500</li> <li><input type="checkbox"/> Small Wireless Facility ...\$250</li> <li><input type="checkbox"/> Major Historic Demolition* ... \$250</li> <li><input type="checkbox"/> Major Historic Property Alteration Certification* ... \$250</li> <li><input type="checkbox"/> Minor Historic Property Alteration Certificate ... \$250</li> </ul> |
|--|---|

**\* Application reviews require a pre-application meeting.**

**PROPERTY & OWNER INFORMATION**

Property

Address: \_\_\_\_\_  
Address City State ZIP

Zoning District:

Lot Size - Acres / Sq. Ft.:

Existing Structure(s) Sq. Ft.:

Lot Coverage:

Property Owner(s) Name:

Owner(s) Email:

Owner(s) Phone(s)#:

 Owner's Address same as Property Address

Owner(s)

Address: \_\_\_\_\_  
Address City State ZIP**APPLICANT / OWNER'S AGENT INFORMATION** Applicant is same as Owner

Applicant Name:

Applicant

Address: \_\_\_\_\_  
Address City State ZIP

Applicant Email:

Applicant Phone(s)#:

**ASSOCIATED APPLICATONS**

Application Type:

Case Number:

*I hereby certify and affirm, under penalty of perjury, that the information I have provide in this application is true and accurate to the best of my knowledge, information, and belief. [NMSA 1978, §30-25-1]*

Signature:

Date:

**STAFF USE ONLY**

Date Received:

Staff:

Case No.#:

Meeting Date:

**SUBMITTALS** Proof of Ownership or

Letter of Authorization from Owner

 Items from associated Application Checklist Complete Application - Date: \_\_\_\_\_ Payment - Accepted upon verification of a complete application - Date: \_\_\_\_\_

## LIGHTING PLAN CHECKLIST

Applicants for all development application reviews must complete this checklist and submit it with the Development Application. Refer to the referenced code sections for additional information. Contact the Planning Division with questions regarding these requirements: [planning@lacnm.us](mailto:planning@lacnm.us).

### PLANS

Provide one of the following methods:

- Prescriptive Method:** (Chart or Spreadsheet)
  - Identify each luminaire type quantity, initial lumen output, BUG rating, the total expected site lumens, and the total size lumens based on the property size
  - A sub-category analysis for the total lumens coming from partially shielded light(s) (e.g. tree, landscape, sculpture, and some wall or façade light) allowed in the requirements below, which cant exceed 20% of the allowable lumens.
  - Supporting data sheets for exact luminaires (model numbers, distribution plots, BUG ratings, luminaire locations, mounting heights, and aiming directions).
- Performance Method:**
  - Luminaire locations, mounting, heights, aiming directions, IES photometric data, buildings, and other physical objects within the site.
  - Total site lumens
  - Light Analysis utilizing an enclosure comprised of calculation planes with zero reflectance values around the perimeter of the site including
  - A signed affidavit that the site lighting plan meets the requirements of Chapter 16.

### ADDITIONAL SUBMITTALS

Based on staff's review – additional submittals may be needed and will be communicated to the applicant by the assigned Case Manager.



See Reverse.

**DECISION CRITERIA 16-74-(f)**

a. A lighting plan shall be approved if it complies with all applicable standards in this Code, particularly Division 6 Outdoor Lighting, and any other adopted County regulations. Explain.

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

- Staff finds that this criterion has been met*
- Staff finds that this criterion has not been met – more information is needed*

**Attach additional sheets, if needed.**