

# CITY OF SIOUX CITY

## Applicant Profile Form

(Complete along with the appropriate application form. Not required with the Design Review Committee Request Form)

Planning Division  
Room 308  
405 6<sup>th</sup> Street  
P.O. Box 447  
Sioux City, IA 51102-0447



Before completing, read the entire Applicant Profile Form and related application. A pre-application conference is **required** for all applications for cluster, mixed housing, and planned neighborhoods; traditional neighborhood development, as well as applications for development in the Airport Protection (AP), Casino Entertainment (CE), Historic Area (HA), and Public Institutional (PI) zoning districts. However, pre-application conferences may be requested for any development type.

### PETITIONER/APPLICANT INFORMATION

Name					
Street Address					
City			State		ZIP
Phone			E-mail Address		
Petitioner's interest in the property	Owner <input type="checkbox"/>	Contract Buyer <input type="checkbox"/>	Architect <input type="checkbox"/>	Engineer <input type="checkbox"/>	Other:

### PROPERTY OWNER (IF DIFFERENT)

Name					
Street Address					
City			State		ZIP
Phone			E-mail Address		

### LEGAL DESCRIPTION (IF LEGAL IS TOO LONG, NOTE BELOW AND ATTACH TO THE APPLICATION)

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### PLANNING AND ZONING DIVISION REQUESTS

**Approvals are issued by the City after compliance with the requirements of the Zoning and Sign Code is determined. A determination is made by the Planning and Zoning Commission, Board of Adjustment, Administrator, or City Council upon recommendation of City staff, Boards, or Commissions. A full list of permits and approval procedures are listed in *Subchapter 25.06-B Permits and Procedures of the Code*.**

<input type="checkbox"/> Vacation	<input type="checkbox"/> Site Plan / Development Concept Plan	<input type="checkbox"/> Conditional/Limited Use Permit	<input type="checkbox"/> Certificate of Appropriateness
<input type="checkbox"/> Zone Change	<input type="checkbox"/> Major changes to a Site/Concept Plan	<input type="checkbox"/> Temporary Use Permit	<input type="checkbox"/> Designation of Historic Site/Landmark
<input type="checkbox"/> Sign Permit	<input type="checkbox"/> Minor Changes to a Site/Concept Plan	<input type="checkbox"/> Appeal	<input type="checkbox"/> Accessory Dwelling Unit
<input type="checkbox"/> Minor Modification	<input type="checkbox"/> Zoning Compliance Certificate	<input type="checkbox"/> Variance	<input type="checkbox"/> Avigation Permit
<input type="checkbox"/> Right-of-Way Encroachment	<input type="checkbox"/> Sign Design Program		<input type="checkbox"/> Interchange Development
<input type="checkbox"/> Text Amendment	<input type="checkbox"/> Interpretation		<input type="checkbox"/> Preliminary/Final Plat

### SIGNATURE

Property Owner's Signature:	Application Date:
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**\*For additional assistance please contact the City Planning and Zoning Division either before or after submission of the application. A copy of the entire Sioux City Zoning and Sign Code is available in the Planning Division office or under Title 25 online at: <http://online.encodeplus.com/regsiouxcity-ia/index.aspx>. See *Subsection 25.06.070* for the complete review procedures.**

# CITY OF SIOUX CITY

Application for a Minor Modification  
(Complete along with the Applicant Profile Form)

Planning Division  
Room 308  
405 6<sup>th</sup> Street  
P.O. Box 447  
Sioux City, IA 51102-0447



## SUBJECT PROPERTY INFORMATION

Owner			
Street Address			
Zoning District		Lot area	
Existing use			

## REQUEST

Proposed project			
Requested Minor Modification (Subsection 25.06.080.14)			

## NARRATIVE

The Sioux City Zoning and Sign Code states that a minor modification shall not be approved unless the applicant establishes the existence of each of the following conditions (Subsection 25.06.080.14(4) Approval Criteria).

The minor modification will not adversely impact the land on which the minor modification is requested and the surrounding properties:

The minor modification will not substantially increase the congestion of buildings, people, or motor vehicles:

The minor modification will not endanger the public health or safety, or otherwise be materially detrimental to the welfare of nearby neighbors or the public at large:

The minor modification will not unduly tax public utilities or governmental services:

The minor modification will not materially injure the enjoyment, use, development, or value of the property in the vicinity:

The property in question will benefit by approval of the minor modification without negatively impacting the neighborhood:

**INFORMATION CHECKLIST**

<input type="checkbox"/>	<input type="checkbox"/> N/A	A survey by a Certified Land Surveyor licensed in the State of Iowa if necessary to describe the property.
<input type="checkbox"/>		A sufficient site plan showing all property lines, buildings, and dimensions, to illustrate the request.
<input type="checkbox"/>		A general area map showing the subject property.
<input type="checkbox"/>		Completed Applicant Profile Form.
<input type="checkbox"/>		Filing fee of \$100.

**SIGNATURE**

Owner/Petitioner's Signature:		Application Date:	
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