



City of Cleveland

Frank G. Jackson, Mayor

City Planning Commission



Cleveland City Hall

601 Lakeside Avenue, Room 501

Cleveland, Ohio 44114

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www.planning.city.cleveland.oh.us

## Planning Commission/Design Review Application

DATE:

PROJECT NAME:

PROJECT ADDRESS:

PROJECT LOCATION (if no address):

CONTACT PERSON (for design review):

COMPANY:

PHONE:

EMAIL:

OWNER:

ARCHITECT/ CONTRACTOR:

PROJECT TYPE:  New Building  Rehabilitation  Addition  Sign  Fence  Parking

USE TYPE:  Residential  Commercial  Industrial  Institutional  Mixed-Use

Review Level:  Storefront  Conceptual  Schematic Design  Final Design Development

I, the undersigned, have received a copy of the Cleveland City Planning Commission's "Design Review: A Guide for Applicants" and agree to follow its guidance in proceeding through the design review process for the subject project.

\_\_\_\_\_  
Signature and date

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(For staff use only)

Received by:

Design Review District Name:

Assigned Review Case Number: