FIGURE 4

APPLICATION FOR DESIGN AND CONSTRUCTION OF INFRASTRUCTURE IMPROVEMENTS

INSTRUCTION: PRINT OR TYPE IN INK ONLY.
(Use Additional Sheets. If Necessary)

1.	APP	LICANT INFORMAT	ION:						
	a.	Developer :							
		Mailing Address:							
		City:	State:	Zip Code					
		Phone No:	Fax No:	Email:					
	b.	Owner's Name:							
		Mailing Address:							
		City:	State:	Zip Code					
		Phone No:	Fax No:	Email:					
		(If owner is Public I	buquerque 🗆 Berr	alillo County					
		Project Manager:		Department:					
		Phone No:	Fax No:	Email:					
	0	Consulting Engineer							
	c.	Mailing Address:	r:						
		City:	Stata	7in Codo					
		Phone No:	State: Fax No:	Email:					
		Filone No.		Elliali					
	d.	Person to contact re	garding this application:						
		Phone No:	Firm :						
2.	LOCATION OF REQUEST:								
	Zone Map No								
	UPC #:		Legal Description :						
If fir	nal plat	not yet approved. Da	te preliminary plat exp	ires:					
	Date	Plat Approved:	Date Plat Re	corded:					
2	DEC			D					
3.	DESCRIPTION OF IMPROVEMENTS PROPOSED.								
	(Give street names where applicable.)								
		(Use Additional She	ets. If needed)						
	Mas	ter Plan Waterline to be	e constructed?	YesNo	Unknown				
	Mate	er Plan Sanitary Sewer	line to be constructed?	YesNo					
	Trai	ls to be constructed?		YesNo					

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4.	LEVELS OF SUBMITTAL: Applicant requests entry into the project design review process as indicated below, and has included appropriate submittals required:								
	Pre-Design (Orientation)			Design Review	(Preliminary = 6	55%-95%)			
	Pre-Design v	w/Submittals		Design Review	(Final = 95% Co	omplete)			
		quests consideration for bmittal is being prepar		l Acceptance	Yes	No			
5.	PROPOSED MEHTODS TO CONSTRUCT								
	Public Improvements will be built by:								
	☐ Private Contract (Procedure A or B)								
	☐ City Contract (Procedure C)								
	Public Improvements will be constructed								
	☐ Under one contract (Single plan set)								
	Under separate contracts for portions of the work (This requires separate plan sets for each contract)								
6.	REQUIRED ATTACHMENTS: (See Pre-Design Phase, DPM Chapter 5).								
	SIGNATUR	E:Applicant/.	Agent						
PROJE	ECT REVIEW	SECTION INTERN	AL USE	ONLY					
Applic	ant Received	By:			Date: _				
Pre-De	esign Confere	nce Date:							
Copy I	Distribution:	Applicant/Agent Project File							
				C	City Project No.:				

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