## **Master Plan Application**

Submittal date:			Building Application #:				
Legal Subdivisior	Name:						
Marketing/Project I	Name:						
Tentative Map #: _			Final M	lap Application #:	(required)		
Planning Design Review Plan #:				Concurrent Review YES or NO			
Developer Name:				License No.:			
Mailing Address: _							
City:				St	Zip:		
Contact Person:							
Phone #:			Cell #:				
E-mail address:							
California Reside	ntial Code	Year					
Developer Plan No. (Alias)	# Of Stories	Elevation	Base Dwelling Sq Ft	Base Garage(s) Sq Ft	Specify No. of Cars	Porch Sq Ft	Patio Sq Ft
Developer Plan No. (Alias)	# Of Stories	Elevation	Option 1 Dwelling Sq Ft	Option 1 Garage(s) Sq Ft	Specify No. of Cars	Porch Sq Ft	Patio Sq Ft
Developer	# Of	Elevation	Option 2	Option 2	Specify	Porch	Patio
Plan No. (Alias)	Stories	Lievation	Dwelling Sq Ft	Garage(s) Sq Ft	No. of Cars	Sq Ft	Sq Ft

## **Online Electronic Submittal Required**

All plans and supporting documents shall be submitted electronically using the URL below. Please reference our
<u>Electronic Plan Review Policy (G-19-33)</u> for submittal guidelines. If the submittal is inconsistent with our guidelines your
project will be returned as incomplete.

http://share.elkgrovecity.org/filedrop/BuildingFileDrop

■ Please reference our Residential Master Plan Policy (B-04-13) for project submittal requirements.