



LAKE HAVASU CITY

Design Review Application

Submit completed application to the Development Services Department / Planning Division:
2330 McCulloch Blvd N. / Lake Havasu City, AZ 86403 or planninginfo@lhcaz.gov

For specific regulatory procedures, see Lake Havasu City Development Code Section 14.05.04(H).

APPLICATION NUMBER _____ DATE _____

(1) OWNER NAME / MAILING ADDRESS / CONTACT INFO

PHONE _____
EMAIL _____

(2) APPLICANT NAME / MAILING ADDRESS / CONTACT INFO (if different than Owner)

PHONE _____
EMAIL _____

(3) ARCHITECT NAME / MAILING ADDRESS / CONTACT INFO

PHONE _____
EMAIL _____

(4) SITE LOCATION
STREET ADDRESS _____
ASSESSOR PARCEL ID _____ TRACT _____ BLOCK _____ LOT _____

(5) SUBMITTAL REQUIREMENTS
a) Site Plan shall include parking layout and design, handicap accessibility, and landscaping.
i) One (1) ea. 8-1/2" x 11" or 11" x 17"
ii) Two (2) ea. 11" x 17" or 24" x 36"
b) Two (2) ea. 11" x 17" or 24" x 36" Landscape Plan (if not included on Site Plan)
c) Two (2) ea. 11" x 17" or 24" x 36" Architectural Building Elevations
d) Two (2) ea. 8-1/2" x 11" or 11" x 17" Addressing Plan
e) Two (2) ea. 11" x 17" or 24" x 36" Grading Plan showing finished grade of structures (if not included on Site Plan)

(6) APPLICATION PROCESSING TIMEFRAME & FEES
a) Staff reviews submittal requirements for completeness and compliance with the Lake Havasu City Code (3 business days).
b) Staff contacts applicant for payment of fee (3 business days). Fees can be paid by credit card, check, or cash.
c) Staff processes review, including internal departments and outside service agencies (10 business days).
d) Staff mails original Notice of Action to owner and a copy to applicant (if different).
e) In the event of denial, subsequent reviews are completed in no more than 10 business days following resubmittal.

New Construction Design Review \$977.06 Tenant Improvement \$488.03

(7) CONTACT PLANNING FOR FURTHER INFORMATION
Trevor Kearns, City Planner II, Phone: (928) 854-0783, kearnst@lhcaz.gov
Chris Gilbert, Planning Division Manager, Phone: (928) 854-0722, gilbertc@lhcaz.gov

(8) CLARIFICATION
A person may request the City to clarify its interpretation or application of a statute, ordinance, code, or policy affecting the processing of this application in accordance with ARS § 9-839.

(9) CERTIFICATION/ACKNOWLEDGEMENT
a) I hereby file the above request as an authorized applicant.
b) To the best of my knowledge, the information provided herein is accurate and true.
c) I am aware of the steps and timeframes involved in the processing of this application.

To submit this application electronically, Lake Havasu City requires that you certify your application by submitting an electronic signature. Please type your name in the field below and click the confirm signature check box.

SIGNATURE _____ DATE _____

CONFIRM SIGNATURE

Notice: Arizona Revised Statutes § 9-495 requires in any written communication between the City and a person, the City provide the name, telephone number, and email address of an employee to provide information if the communication: 1) Demands payment of a tax, fee, penalty, fine or assessment; 2) Denies an application for a permit or license that is issued by the City; or 3) Requests corrections, revisions or additional information or materials needed for approval of any application for a permit, license or other authorization that is issued by the City. The employee shall reply within five (5) business days after City's receipt of a communication if authorized and able.