



**CITY OF McALLEN  
Planning Department  
Site Plan Application**

311 North 15<sup>th</sup> Street  
McAllen, TX 78501  
P. O. Box 220  
McAllen, TX 78505-0220  
(956) 681-1250  
(956) 681-1279 (fax)

**Project Name** \_\_\_\_\_

**Legal Description** \_\_\_\_\_

**Address** \_\_\_\_\_

**Proposed Use** \_\_\_\_\_

**Check Main Contact (only one)**

**Owner / Agent**

**Company** \_\_\_\_\_ **Contact** \_\_\_\_\_

**Address** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Fax** \_\_\_\_\_

**Email** \_\_\_\_\_

**Engineer / Architect (If applicable)**

**Company** \_\_\_\_\_ **Contact** \_\_\_\_\_

**Address** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Fax** \_\_\_\_\_

**Email** \_\_\_\_\_

This is to certify that the information on this form is COMPLETE, TRUE and CORRECT and the undersigned is authorized to make this application.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Print Name** \_\_\_\_\_

**Site Plan Submittal Requirements:**

**Submittal Fees:**

Site Plan Fee: **\$350.00**

Three (3) 24 X 36 prints that include:

- Cover sheet (w/ vicinity map, address)
- Dimensioned site plan ( property lines, driveways)
- Recorded plat or Plat in review process (when applicable)

One – 11” X 17” Site Utility Plan that includes:

- Site utility Layout – Drawing to scale shall include existing and Proposed Water & Sewer Site Utility Improvements; Location of FDC & Backflow Preventer; existing & proposed Fire Hydrants
- Landscape and Irrigation Plan
- Trip Generator when applicable
- Traffic Impact Analysis (TIA) – see standard design guide; (When applicable)
- One Legible reduced copy – 8 ½” X 11:
- AutoCAD 2005 DWG and PDF Format file of site plan and Board Approved site plan
- Existing site plan/survey

Office Use Only	
Case Planner:	_____
Date Received:	_____
Received By:	_____
Filing Fee:	_____
Existing Zoning:	_____
Proposed Zoning:	_____
Rezoning Required:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Conditional Use Permit Required:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Variance Required:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Subdivision Required:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Planning & Zoning Comm. Hearing Date*:	_____
Planning & Zoning Approval Date*:	_____

*\*Changes to a Board approved site plan, ownership, designer/architect, engineer will require a new application with related information and fees.\*\*Once the site plan has been approved by the Planning and Zoning Commission, an AutoCAD DWG file of the Board Approved site plan will be required to be submitted.\*\**