



Pre-Application Form

903 W Main Street, Blue Springs, MO | 816-228-0207
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OFFICE USE ONLY
PREP-
MEETING DATE:
MEETING TIME:
LOCATION:
PLANNER:

PROJECT LOCATION INFORMATION

Project Name

Project Address (Parcel ID if No Address Assigned or Multiple Addresses)

Legal Description (attach as a separate page if too large)

APPLICANT INFORMATION

Name of Applicant

Company

Phone

Email Address

Address

City

State

Zip Code

With the signing and submittal of this meeting request, I hereby depose and say that all the above statements and the statements contained in papers submitted herewith are true to the best of my knowledge and agree to allow the City of Blue Springs to copy and distribute all project plans, materials, and information as necessary for the project review process.

Applicant Signature

Date

REQUIRED DOCUMENTS CHECKLIST

	DESCRIPTION	NUMBER
<input type="checkbox"/> Project Location Information	Provide the Project Address and/or Parcel ID	
<input type="checkbox"/> Project Description	Written description concerning the scope of the proposed project. Use the space provided below. Provide a separate sheet if more space is required.	1 set
<input type="checkbox"/> Plans Set (if available)	Full plans set folded & collated. Must be a legible size.	3 sets
	Reduced set of full plans set on 8.5" x 11"	1 set

Project Description:

PLEASE NOTE THE FOLLOWING:

- **COMPLETE APPLICATIONS WITH ATTACHMENTS MUST BE SUBMITTED NO LATER THAN 4:00 PM ON THE FRIDAY PRIOR TO THE DESIRED THURSDAY MEETING;**
- **There are only enough time slots to schedule 3-4 applicants on a first come first serve basis;**
- **Meetings are typically held on Thursday afternoons at Blue Springs City Hall.**

Contact Information Sheet (if available)

PROJECT LEAD INFORMATION

Name	Company Name		
Address	City	State	ZIP Code
Email	Phone	Fax	

DEVELOPER INFORMATION

Name	Company Name		
Address	City	State	ZIP Code
Email	Phone	Fax	

ENGINEER INFORMATION

Name	Company Name		
Address	City	State	ZIP Code
Email	Phone	Fax	

ARCHITECT INFORMATION

Name	Company Name		
Address	City	State	ZIP Code
Email	Phone	Fax	

SURVEYOR INFORMATION

Name	Company Name		
Address	City	State	ZIP Code
Email	Phone	Fax	

LANDSCAPE ARCHITECT INFORMATION

Name	Company Name		
Address	City	State	ZIP Code
Email	Phone	Fax	

ATTORNEY INFORMATION

Name	Company Name		
Address	City	State	ZIP Code
Email	Phone	Fax	

OTHER INFORMATION

Name	Company Name		
Address	City	State	ZIP Code
Email	Phone	Fax	