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JUL 29 2015

City of Flagstaff *Resubmitted* Community Development Division

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 www.flagstaff.az.gov

SUBD

Date Received <i>July 6, 2015</i>		Application for Subdivision Review		File Number <i>DEV 13-014</i>
Property Owner(s) <i>BY: Pinnacle Dev Co, Ltd</i>		Phone <i>928-853-8510</i>		
Mailing Address <i>3605 S. Flagstaff Ranch Rd</i>	City, State, Zip <i>Flagstaff, AZ 86005</i>	Email <i>dkree@capstonecos.com</i>		
Applicant(s) <i>magallon Engineering</i>		Phone <i>214 0214</i>		
Mailing Address <i>411 W. Summit</i>	City, State, Zip <i>Flagstaff AZ 86001</i>	Email <i>magallon99@aol.com</i>		
Project Representative		Phone		
Mailing Address		City, State, Zip		Email
Requested Review:	<input type="checkbox"/> Development Master Plan	<input type="checkbox"/> Conceptual Plat	<input type="checkbox"/> Preliminary Plat P&Z and Council	
	<input type="checkbox"/> Modified Subdivision	<input type="checkbox"/> Preliminary Plat	<input checked="" type="checkbox"/> Final Plat- Council	

Project Name: <i>Pinnacle Pines Unit 2 Phase 2</i>		Site Address <i>600 E Sterling</i>		Parcel Number <i>105-20-117</i>
Proposed Use <i>townhomes</i>		Existing Use	Subdivision, Tract & Lot Number <i>T-15A, Pinnacle Pines Unit 2 Phase 1</i>	
Zoning District <i>MR</i>	Regional Plan Category <i>suburban</i>	Flood Zone <i>X</i>	Size of Site (Sq. ft. or Acres) <i>11.22 ac</i>	
Property Information:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Located in an existing Local/National Historic District? (Name: _____) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Existing structures are over 50 years old at the time of application? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Subject property is undeveloped land?			
Surrounding Uses	North <i>Res</i>	South <i>USFS</i>	East <i>Res</i>	West <i>USFS</i>
(Res, Com, Ind)				
Proposed Use:	Number of Lots <i>49</i>	Number of Units <i>49</i>	Number of acres per use <i>4± units/acre</i>	Building Square Feet

Please complete a "Subdivision Review Application" and provide an initialed "Application and Information Checklist" form along with the required number of plans and information as appropriate for a Development Master Plan, Conceptual, Preliminary or Final Plat. **Incomplete submittals will not be scheduled.**

Property Owner Signature: (required) <i>[Signature]</i>	Date:	Applicant Signature: <i>[Signature]</i>	Date: <i>5/19/15</i>
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For City Use

Date Filed: <i>5-19-15</i>	Case Number (s) <i>pspr 20150025 P2-15-00025</i>				
P & Z Hearing Date:	Publication and Posting Date:				
Council Hearing Date:	Publication and Posting Date:				
Fee Receipt Number: <i>1197</i>	Amount: <i>\$1244-</i> Date: <i>5-19-15</i>				
Action by Planning and Zoning Commission:	Action By City Council:				
<input type="checkbox"/> Approved	<input type="checkbox"/> Approved				
<input type="checkbox"/> Denied	<input type="checkbox"/> Denied				
<input type="checkbox"/> Continued	<input type="checkbox"/> Continued				
Staff Assignments	Planning <i>Brian</i>	Engineering <i>Amey</i>	Fire <i>Kent</i>	Public Works/Utilities <i>Jim</i>	Stormwater <i>Chris</i>