



**River North Residents Association
Development Review Form**

Proposed Project

Name:	
Location/Address:	
Description:	

Project Team

Developer(s):	
Architect(s):	
Attorney(s):	
Contractor(s):	
Consultants:	
Other:	

Contact Name:		Title:	
Company:			
Mailing Address:			
Office:		Cell:	
Web:		Email:	
		Fax:	

Building Information

<input type="checkbox"/> Condo <input type="checkbox"/> Rental <input type="checkbox"/> Office <input type="checkbox"/> Retail <input type="checkbox"/> Hotel <input type="checkbox"/> Other:			
Height:		# Floors:	
Lot Size (sf):		Avg. Floor Plate (sf):	
# Condo Units:		# Rental Units:	
# Hotel Units:		Office (sf):	
Retail (sf):		Restaurant (sf):	
Public Park (sf):		# Deeded Pkg Units:	
# Rental Pkg Units:		# Public Pkg Units:	
Avg. C/SF - Rental:	\$	Avg. C/SF - Condo:	\$
<input type="checkbox"/> As-Of-Right <input type="checkbox"/> Variance Sought <input type="checkbox"/> Planned Development			
Current Zoning:		Proposed Zoning:	
Eligible Bonus(es):			
Pre-Bonus FAR:		Final FAR:	
Comments:			



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Leasing

% Leased Office Space:		Average Gross Rent/sf:	\$
Anchor Tenant(s):			
% Leased Retail Space:		Average Gross Rent/sf:	\$
Anchor Tenant(s):			

Building Design

Structure Type:	
Exterior Surfaces:	
Garage Height:	
Parking Entrance/Exit:	
Delivery Location:	
Setbacks:	
Lead Certification:	
Green Features:	
Project Amenities:	
Streetscaping:	
Signage:	
Exterior Lighting:	

Governmental Approvals Needed

<input type="checkbox"/> Plan Commission <input type="checkbox"/> Planning Dept. <input type="checkbox"/> Zoning Board <input type="checkbox"/> Landmark Commission	
Anticipated Hearing Dates:	

Anticipated Project Timing

Project Approval:		Presale Date:	
Groundbreaking:		Delivery:	

Comments

Please return completed form to the RNRA via fax, email or regular mail and include elevations, site plans, floor plans and any other available collateral materials. Thank you.