

### Preliminary Land Use Service (PLUS)

Delaware State Planning Coordination

122 Martin Luther King Jr. Blvd., South • Dover, DE 19901 • Phone: 302-739-3090 • Fax: 302-739-5661

**Purpose of PLUS** - -The PLUS process is intended to provide consolidated State comments regarding the proposed project. The Applicant is encouraged to submit the application during the concept stages of planning as this process often offers recommendations for changes to the plan. The application should be submitted after the pre-application meeting with the local jurisdiction but before formal application is made.

Please complete this PLUS application in its entirety. **All questions must be answered. If a question is unknown at this time or not applicable, please explain.** Unanswered questions on this form could lead to delays in scheduling your review. This form will enable the state staff to review the project before the scheduled meeting and to have beneficial information available for the applicant and/or developer at the time of review. If you need assistance or clarification, please call the State Planning Office at (302) 739-3090.

PLUS Number (to be completed by OSPC): \_\_\_\_\_  
Investment Level Per Strategies for State Policies and Spending (to be determined by OSPC): \_\_\_\_\_

1. Project Title/Name:

2. Location ( please be specific):

3. Parcel Identification #: \_\_\_\_\_ 4. County or Local Jurisdiction Name: where project is located: \_\_\_\_\_

5. If contiguous to a municipality, are you seeking annexation:

6. Owner's Name:

Address:

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

7. Equitable Owner/Developer (This Person is required to attend the PLUS meeting):

Address:

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

8. Project Designer/Engineer:

Address:

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

9. Please Designate a Contact Person, including phone number, for this Project:



25. Please estimate How many vehicle trips will this project generate on an average weekday? A trip is a vehicle entering or exiting. If traffic is seasonal, assume peak season:

What percentage of those trips will be trucks, excluding vans and pick-up trucks?

26. Will the project connect to state maintained roads?  Yes  No

27. Please list any locations where this project physically could be connected to existing or future development on adjacent lands and indicate your willingness to discuss making these connections.

28. Are there existing sidewalks?  Yes  No; bike paths  Yes  No  
Are there proposed sidewalks?  Yes  No; bike paths  Yes

Is there an opportunity to connect to a larger bike, pedestrian, or transit network?  Yes  No

29. To your knowledge, is this site in the vicinity of any known historic/cultural resources or sites?  Yes  No

Has this site been evaluated for historic and/or cultural resources?  Yes  No

Would you be open to a site evaluation by the State Historic Preservation Office?  Yes  No

30. To promote an accurate review of your parcel's features, would you permit a State agency site visit?  Yes  No

Person to contact to arrange visit: \_\_\_\_\_ phone number: \_\_\_\_\_

31. Are any federal permits, licensing, or funding anticipated?  Yes  No

I hereby certify that the information on this application is complete, true and correct, to the best of my knowledge.

\_\_\_\_\_  
Signature of property owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Person completing form  
(If different than property owner)

\_\_\_\_\_  
Date

**Signed application must be received before application is scheduled for PLUS review.**

This form should be returned to the Office of State Planning **electronically** at [plus@state.de.us](mailto:plus@state.de.us) along with an **electronic copy of any site plans and development plans for this site**. Site Plans, drawings, and location maps should be submitted as image files (JPEG, GIF, TIF, etc.) or as PDF files. GIS data sets and CAD drawings may also be submitted. **If electronic copy of the plan is not available, contact The Office of State Planning Coordination at (302) 739-3090 for further instructions.** A signed copy should be forwarded to the Office of State Planning, 122 William Penn Street, Dover, DE 19901. Thank you for this input. Your request will be researched thoroughly. **Please be sure to note the contact person** so we may schedule your request in a timely manner.