## FORM R1: EPC RECOMMENDATION

A single .PDF file of the complete application, including all required plans and documents, must be provided. Note: If the file is over the 9 MB limit, please e-mail <a href="mailto:PLNDRS@cabq.gov">PLNDRS@cabq.gov</a> to request an upload link.

	RANK 1 COMPREHENSIVE PLAN  The EPC is a recommending body; the City Council makes the final decision.  Please refer to IDO 14-16-6-2(E)(3)(f) and 14-16-6-3(E)(7)  Project letter thoroughly describing the request  Evidence of Public Outreach Efforts (required and other)  Zone Atlas map (unless the request would apply City-wide)  The Comprehensive Plan with amendments clearly indicated (as a .pdf	
	COMMUNITY PLANNING AREA (CPA) ASSESSMENT REPORT REVIEW  CPA reports shall be forwarded to the City Council for acceptance. The EPC makes a recommendation to City Council.  Please refer to IDO 14-16-6-2(E)(3)(f) and 14-16-6-3(E)(7)  Project letter thoroughly describing the request  Evidence of Public Outreach Efforts (required and other)  Zone Atlas map  The CPA Assessment Report (as a .pdf)	
	RANK 2 FACILITY PLAN  The EPC is a recommending body; the City Council makes the final decision. See IDO Table 6-1-1.  Please refer to IDO 14-16-6-2(E)(3)(f) and 14-16-6-3(E)(7)  Project letter thoroughly describing the request  Evidence of Public Outreach Efforts (required and other)  Zone Atlas map (unless the request would apply City-wide)  The Rank II Facility Plan with amendments clearly indicated (as a .pdf)	
	RANK 3 RESOURCEMANAGEMENT PLAN  City departments may choose to have Rank III RMPs reviewed by the EPC and/or accepted by the City Council when additional input is desired.  Please refer to IDO 14-16-6-3(C)  Evidence of Public Outreach Efforts (required and other)  Project letter thoroughly describing the request  Zone Atlas map (unless the request would apply City-wide)  The RMP with amendments clearly indicated (as a .pdf)	
	CAPITAL IMPLEMENTATION PROGRAM (CIP)  The EPC makes recommendations for programming of capital improvements for each biennial CIP.  Please refer to IDO 14-16-6-2(E)(3)(c)  Evidence of Public Outreach Efforts (required and other)  Project letter thoroughly describing the request  Zone Atlas map (unless the request would apply City-wide)  The CIP Plan (as a .pdf)  the applicant or agent, acknowledge that if any required information is not submitted with this application, the application will not be	
	cheduled for a public meeting or hearing, if required, or otherwise processed until it is complete.	prication, the application will not be
Signature:		Date:
Printed Name:		☐ Applicant or ☐ Agent
FO	R OFFICIAL USE ONLY	
Project Number: Case Number  - Staff Signature:		