



COMMUNITY DEVELOPMENT DEPARTMENT Conditional Use Permit Application.

17.76- All rules and regulations of the Conditional Use Permit Ordinance must be met and followed for approval of a Conditional Use Permit. There shall be no presumption of approval of any aspect of the process. ***An application will not be accepted if not complete.*** All sections of the application must be filled out and correct information provided. ***A Conditional Use Permit application requires a detailed site plan, which includes existing and futures dwellings/structures, distances to property lines, applicant information, etc.***

OFFICE USE ONLY

CUP# _____ Fee: \$300.00 Receipt # _____

Date Paid: _____

Is this an amendment? Yes No Date approved _____ Denied _____

Due date for application: _____ by 5:00 p.m. Planning Commission Meeting Date _____

Property information and location (All lines applicable to this site must be filled in)

Section _____ Township _____ Range _____

Parcel # _____ Current Zoning Designation _____

Total acreage of Parcel: _____ Area Occupied by this use: _____

PROPERTY ADDRESS: _____

You MUST include a parcel map obtained from the Uintah County Recorder's Office with this application!

Applicant information

Name(s): _____

Mailing Address: _____

Physical Address of Property: _____

City/County: _____ State: _____ Zip _____

Office/ Home Phone: _____ Mobile Phone _____

E-Mail Address: _____

Property owner(s) information (If different from Applicant)

Name(s): _____

Mailing Address: _____

City/County: _____ State: _____ Zip: _____

Office/home phone: _____ Mobile Phone: _____

E-mail address: _____

A copy of the deed, offer or tax notice MUST be included to demonstrate ownership

Agent

For the property owner(s)

For the Applicant

Name(s): _____

Address: _____

City/County: _____ State: _____ Zip: _____

Office/home phone: _____ Mobile phone: _____

E-mail address: _____

An agent authorization form properly signed and notarized MUST be included with this application

ATTACH an 8.5 x 11 COPY OF LOCATION MAP, SITE AND BUILDING PLAN, AND DETAILED DESCRIPTION OF PROPOSED USE, INCLUDING ANY PARKING, BUILDING ACCESS, AND EQUIPMENT THAT WILL BE USED. MUST INCLUDE A NARRATIVE OF INTENTIONS OF USE, INCLUDING HOURS OF OPERATION AND ANY OTHER NUISANCES.

APPLICATION IS HEREBY MADE TO THE PLANNING COMMISSION REQUESTING THAT:

I (We) understand that the Uintah County Commission shall not authorize a conditional use permit unless the evidence presented is such as to establish that such use will not, under the circumstances of the particular case, be detrimental to the health, safety or general welfare of persons residing or working in the vicinity, and the proposed use will comply with the regulations and conditions specified in the UINTAH County zoning ordinance for such use. As per section **17.12.200** any person aggrieved by a decision of the planning commission or the zoning administrator regarding the issuance, denial or revocation or amendment of a conditional use permit may appeal such decision to the board of county commissions within 30 days of the date of the decision.

I certify that all information listed on this application is true, accurate, and complete. I do hereby acknowledge that any misrepresentation could result in the revocation of this permit.

Signature

Date

Signature

Date