



APPLICATION FOR A CONDITIONAL USE PERMIT

NEW BUSINESS NEW CONSTRUCTION OTHER

APPLICANT: _____

MAILING ADDRESS: _____

PHONE: _____ CELL _____ EMAIL: _____

PROPOSED PROJECT/BUSINESS: _____

PROPOSED LOCATION: _____

OWNER OF PROPERTY (if different) _____

MAILING ADDRESS: _____

PHONE: _____ CELL _____ EMAIL: _____

TAX /PARCEL # _____ ZONING DISTRICT _____ # OF ACRES _____

BRIEF DESCRIPTION OF PROJECT:

Signature of Owner

Date

Signature of Applicant

Date

SUBMITTED ITEMS INCLUDED CHECKLIST:

- APPLICATION**
- DETAILED DESCRIPTION OF PROJECT AND USE**
- IMPACTS/MITIGATION**
- LOCATION MAP (8X11)**



- **SITE AND BUILDING PLAN (8X11)**
- **DEPT. SIGN OFFS**
- **\$300.00 APPLICATION FEE**
- **ENGINEERS ESTIMATE OF COST OF PROJECT**

**WHAT ARE THE POSSIBLE IMPACTS OF YOUR PROJECT RELATING TO THE FOLLOWING?
HOW WILL THE IMPACTS BE MITIGATED (if applicable)**
(use separate document if preferred)

1. Impacts to Health and Safety including water and sewer hookup/disposal issues:

Mitigation method _____

2. Impacts to Safety:

Mitigation method _____

3. Impacts to Noise:

Mitigation method _____

4. Impacts on the Master Plan or special characteristics of the zoning district in which the project will be located:

Mitigation method _____

5. Impacts to Performance of completion of the project:

Mitigated method _____

6. Impacts to County Roads:

Mitigation method _____



CONTINUED.....

7. Impacts to the effect of the use on neighboring and nearby properties

Mitigation method _____

8. Impacts to the Public's interest in general, such as impacts on watersheds, recreation, wildlife, aesthetics, etc.:

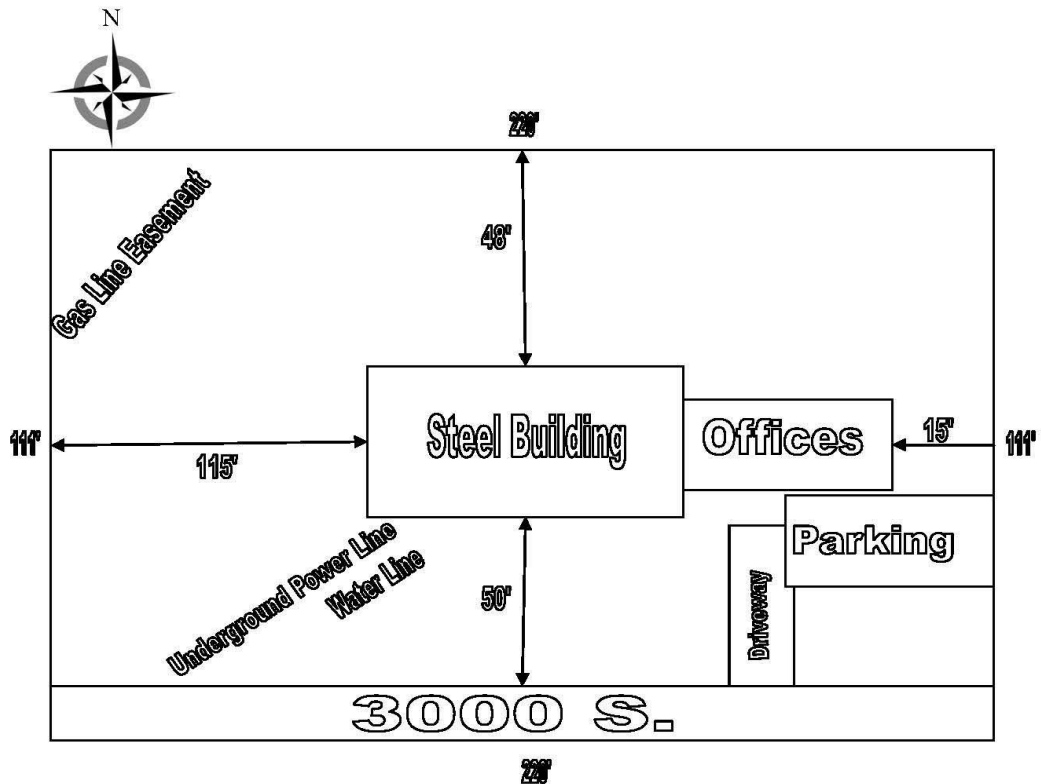
Mitigation method _____

9. Permits, licenses, or other certifications that may be required by other governmental entities:

**COMMERCIAL
SITE PLAN REQUIREMENTS**

SITE PLANS: (See below for sample site plan)

1. Drawn to scale on 8 ½” by 11” paper (no larger than 8 ½” by 14” preferred) with North arrow indicated.
2. Show parcel shape and dimensions.
3. Show location of all buildings, existing and proposed with distances between buildings and to property lines.
4. Entrance/access direction and location of building for addressing purposes.
5. Elevations at property corners and building corners. You may assume a floor elevation of 100 feet or use actual elevations.
6. Locations of:
 - a. Powerline(s)-buried and overhead
 - b. Waterline(s)
 - c. Location of sewer or septic system (drain field)
 - d. Utility easements
 - e. Dedicated easements or rights of way
 - f. Canals and/or ditches
5. Locations and names of roads
6. Site Plans/subdivision plats submitted electronically when possible





DEPARTMENT APPROVAL SIGN-OFF PAGE- INCLUDE WITH APPLICATION

Access: The County Road Department has reviewed the information regarding the above proposed project. Our Review concludes that the following impacts will be: _____ Comments: _____

 County Road Supervisor, _____ Date _____
 Road Access 636-3268

Noxious Weed Review: The County Weed Department has reviewed the location of the above proposed project. Our review concludes that the following mitigation and control requirements are: _____ Comments: _____

 Supervisor, 636-3270 _____ Date _____

County Engineer Approval: The County Engineer Department has reviewed the information regarding the above proposed project. Our review concludes the drainage plan and engineering requirements are: _____ Comments: _____

 Engineer, 636-3231 _____ Date _____

Water and Sewer: *(may not be required at this time) Some uses will submit with building permit application*
 The Water Use Authority has reviewed the information regarding the proposed project. Our review has concluded the following requirements are:

PRIWID/ State/ SSD/Other Supplier _____ Comments: _____

 PRWID/State /SSD/other _____ Date _____

The SEUHD has reviewed the information regarding the proposed project. Our review has concluded the following requirements are: _____ Comments: _____
 SOUTHEASTERN UTAH HEALTH DEPT. APPROVAL

 SEUHD Representative 637-3671 _____ Date _____

Utah Highway Access: *(may not be required)* The Utah Department of Transportation has reviewed the information regarding the above proposed project. Our review concludes that the following impacts will be: _____ Comments: _____

 UDOT Representative, 636-1470 _____ Date _____

