

Fee: \_\_\_\_\_



## CONDITIONAL USE PERMIT APPLICATION

Send all completed and properly signed forms (including attachments as necessary) along with applicable fees to: Price City Community Development Department, P.O. Box 893, 185 East Main, Price, UT 84501. For questions call (435) 636-3184.

Please check one.

- New Business** (Complete boxes 1 through 13 on page 1, and all subsequent pages)
- New Construction/Development** (Check all applicable boxes below and complete entire application)

Plan Phase:

- Concept
- Preliminary
- Final

**PLEASE TYPE OR PRINT LEGIBLY.**

<b>Applicant Information</b>			
1. Applicant's Name:		2. Title:	
3. Applicant's Mailing Address:			4. Suite/Apt. No.:
5. City:	6. State:	7. Zip Code:	
8. County:		9. Telephone: (    )	
<b>Project Information</b>			
10. Name of Project (Business):			
11. Address of Proposed Project:			
12. Zone District (see attached zoning map):			
<b>Nature of Proposed Work (Check all applicable items in boxes 13 through 16)</b>			
13. <input type="checkbox"/> Sign <input type="checkbox"/> Commercial <input type="checkbox"/> Residential	14. <input type="checkbox"/> Zone Change <input type="checkbox"/> Storm Drainage <input type="checkbox"/> Street Work <input type="checkbox"/> Road Dedication <input type="checkbox"/> Water <input type="checkbox"/> Sewer	15. <input type="checkbox"/> Excavation <input type="checkbox"/> Fill Work <input type="checkbox"/> Building <input type="checkbox"/> Subdivision <input type="checkbox"/> Apartments <input type="checkbox"/> Electrical	16. <input type="checkbox"/> Industrial <input type="checkbox"/> Annexation <input type="checkbox"/> Flood Plain <input type="checkbox"/> Recreation <input type="checkbox"/> Street Opening <input type="checkbox"/> Demolition
17. Quarter Section(s):	18. Section(s):	19. Township(s):	20. Range(s) & Base:
21. Estimated Cost of Project:  a) Site Work     \$ _____ b) Buildings     \$ _____ c) Other            \$ _____ Total            \$ _____		22. Electrical Load Sheet:  <i>(Attach preliminary and final to application)</i>	
23. Project Plans:  <input type="checkbox"/> Plans Included <input type="checkbox"/> Attachments (Number) _____			

24. Brief Description of Project:

Four horizontal lines for text entry.

25. Justification (Explain why this project is needed):

Four horizontal lines for text entry.

26. Names and Addresses of Adjoining Property Owners, Lessees, Etc.:

NAME	ADDRESS (City, ST, Zip)	TELEPHONE
1.		( )
2.		( )
3.		( )
27. Estimated Starting Date: / /	28. Estimated Completion Date: / /	29. Has P.R.W.I.D. Sewer Survey Been Submitted? <input type="checkbox"/> Yes <input type="checkbox"/> No

Signature of Property Owner

Date

Please Print Name

Title

**Office Use Only**

**Recommendation of Planning and Zoning Administrator (Community Director):**

Approve

Decline

**Comments:**

Three horizontal lines for text entry.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Requires:**

Building Permit

Conditional Use Permit

Code Amendment

Board of Adjustments Variance

Flood Plain Development Permit

Other: \_\_\_\_\_

## **SITE PLAN**

Please provide a drawing of your proposed site in the space below. Include building floor plan, profiles, cross-sections, dimensions, setbacks, and signs. Also indicate exits, restrooms, and fire extinguisher placement. Use an attached sheet of paper, if necessary.