

PARK CITY MUNICIPAL CORPORATION
PLANNING DEPARTMENT
445 MARSAC AVE ° PO BOX 1480
PARK CITY, UT 84060
(435) 615-5060



ADMINISTRATIVE PERMIT / CONDITIONAL USE PERMIT

<i>For Office Use Only</i>			
STAFF DETERMINATION	PROJECT PLANNER	APPLICATION #	_____
APPROVED	_____	DATE RECEIVED	_____
DENIED	_____	EXPIRATION	_____

PROJECT INFORMATION

NAME: _____

ADDRESS: _____

TAX ID: _____ OR
SUBDIVISION: _____ OR
SURVEY: _____ LOT #: _____ BLOCK #: _____

APPLICANT INFORMATION

NAME: _____

MAILING ADDRESS: _____

PHONE #: () - FAX #: () -
EMAIL: _____

APPLICANT REPRESENTATIVE INFORMATION

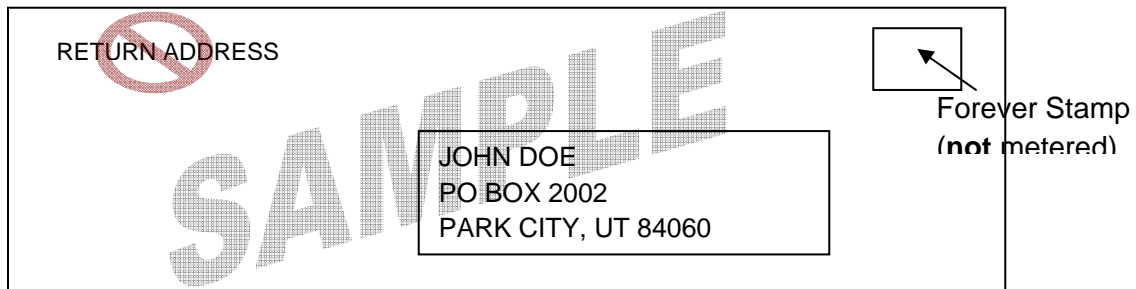
NAME: _____

PHONE #: () -
EMAIL: _____

If you have questions regarding the requirements on this application or process please contact a member of the Park City Planning Staff at (435) 615-5060 or visit us online at www.parkcity.org.

SUBMITTAL REQUIREMENTS – All of the following items must be included in order for the Planning Department to take the application.

1. Completed and signed application form.
2. Provide a written statement describing the request and any other information pertaining to the conversion of the proposed project.
3. Review fees - \$330.00 per application.
4. Two (2) copies of 11" x 17" of the following:
 - Site Plan drawn **to scale** showing existing and proposed conditions
 - Proposed layout, circulation, and location (if applicable)
 - Parking layout (if applicable)
 - Lighting and Sign locations (if applicable)
 - Photos of furniture to be used (including umbrellas, if applicable)
 - **Any additional information pertaining to compliance with the Land Management Code relating to the specific criteria for the requested use as described in the Land Management Code contained in applicable zoning district and supplemental regulation.**
5. List of property owners, names, and addresses of adjacent properties. The distance is measured from the property line, not the location of the request. Please provide the Summit County Assessor's Parcel Number for each property if possible.
6. Stamped, addressed #10 size business envelopes for adjacent property owners.
 - Envelopes (example given below of proper addressing) with mailing labels and stamps affixed. ***Please do not use self-adhesive style envelopes, do not include a return address, and do not use metered postage.***
 - **Stamps must be USPS Forever.**



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ACKNOWLEDGEMENT OF RESPONSIBILITY

This is to certify that I am making an application for the described action by the City and that I am responsible for complying with all City requirements with regard to this request. This application should be processed in my name and I am a party whom the City should contact regarding any matter pertaining to this application.

I have read and understood the instructions supplied by Park City for processing this application. The documents and/or information I have submitted are true and correct to the best of my knowledge. I understand that my application is not deemed complete until a Project Planner has reviewed the application and has notified me that it has been deemed complete.

I will keep myself informed of the deadlines for submission of material and the progress of this application. I understand that a staff report will be made available for my review three days prior to any public hearings or public meetings. This report will be on file and available at the Planning Department in the Marsac Building.

I further understand that additional fees may be charged for the City's review of the proposal. Any additional analysis required would be processed through the City's consultants with an estimate of time/expense provided prior to an authorization with the study.

Signature of Applicant: _____
Name of Applicant: _____
Mailing Address: _____
Phone: _____ Fax: _____
Email: _____
Type of Application: _____

AFFIRMATION OF SUFFICIENT INTEREST

I hereby affirm that I am the fee title owner of the below described property or that I have written authorization from the owner to pursue the described action. I further affirm that I am aware of the City policy that no application will be accepted nor work performed for properties that are tax delinquent.

Name of Owner: _____
Mailing Address: _____
Street Address/ Legal Description of Subject Property: _____

Signature: _____ Date: _____

1. If you are not the fee owner attach a copy of your authorization to pursue this action provided by the fee owner.
2. If a corporation is fee titleholder, attach copy of the resolution of the Board of Directors authorizing the action.
3. If a joint venture or partnership is the fee owner, attach a copy of agreement authorizing this action on behalf of the joint venture or partnership
4. If a Home Owner's Association is the applicant than the representative/president must attaché a notarized letter stating they have notified the owners of the proposed application. A vote should be taken prior to the submittal and a statement of the outcome provided to the City along with the statement that the vote meets the requirements set forth in the CCRs.

Please note that this affirmation is not submitted in lieu of sufficient title evidence. You will be required to submit a title opinion, certificate of title, or title insurance policy showing your interest in the property prior to Final Action.

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