



☎ 435-874-2323
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🌐 www.hildalecity.com

CONDITIONAL USE PERMIT

City of Hildale
320 East Newel Avenue
Hildale, Utah 84784
(435) 874-1160
FAX (435) 874-2603

Fee: \$100

<i>For Office Use Only:</i> File No. _____ Receipt No. _____
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APPLICATION & SUBMITTAL CHECKLIST

Name: _____ Telephone: _____

Address: _____ Fax No. _____

Email: _____

Agent (If applicable): _____ Agent's Phone: _____

Agent email: _____

Address of Subject Property: _____

Tax ID of Subject Property: _____ Zone District: _____

Proposed Conditional Use: (Describe, use extra sheet if necessary) _____

This application shall be accompanied by the following:

- _____ 1. A plot plan showing the following:
 - _____ Property boundaries, dimensions and existing streets.
 - _____ Location of existing and proposed building or livestock facility
 - _____ Adjoining property lines and uses within one hundred (100) feet of subject property.
- _____ 2) A reduced copy of all plans (8 ½ x 11 if readable, or 11 x 17) if original plans are larger.
- _____ 3) Building floor plans for new construction
- _____ 4) Digital copy of all plans sent to planning@hildalecity.com
- _____ 5) A statement of how the applicant intends to meet the conditions for the use desired
- _____ 6) Signed and notarized Affidavit of Property owner showing evidence that the applicant has control of the property or copy of warranty deed

Note: It is important that all applicable information noted above along with the fee is submitted with the application. An incomplete application will not be scheduled for Planning Commission consideration. Planning Commission meetings are held on the third Monday of each month at 6:30 p.m. The deadline date to submit the application is 10 business days prior to the scheduled meeting. Once your application is deemed complete, it will be put on the agenda for the next Planning Commission meeting. A deadline missed or an incomplete application could result in a month's delay.

(Office Use Only)

Date Received: _____ Received by: _____

Date application deemed to be complete: _____ Completion determination made by: _____

APPROVAL STANDARDS

Approval standards can be found in the Hildale City Land Use Ordinance section 152-7-9 E2a-E2o

APPEALS

Any person adversely affected by a decision of the Zoning Administrator regarding the transfer, issuance or denial of a conditional use permit, may appeal such decision to the Appeal Authority by filing written notice of appeal, stating the grounds therefore within fourteen (14) days from the date of the decision. The appeal is filed with the Planning and Zoning Administrator. The decision of the Appeal Authority is final unless appealed to a court of competent jurisdiction with thirty (30) days from the date of decision of the Appeal Authority.

AFFIDAVIT
PROPERTY OWNER

STATE OF UTAH)

COUNTY OF)

I (we), _____, being duly sworn, depose and say that I (we) am (are) the owner(s) of the property identified in the attached application and that the statements herein contained and the information provided identified in the attached plans and other exhibits are in all respects true and correct to the best of my (our) knowledge. I (we) also acknowledge that I have received written instructions regarding the process for which I am applying and the Hildale City Planning staff have indicated they are available to assist me in making this application.

(Property Owner)

(Property Owner)

Subscribed and sworn to me this _____ day of _____ 20__.

(Notary Public)

Residing in: _____

My Commission Expires: _____

Agent Authorization

I (we), _____, the owner(s) of the real property described in the attached application, do authorize as my (our) agent(s) _____ to represent me (us) regarding the attached application and to appear on my (our) behalf before any administrative or legislative body in the City considering this application and to act in all respects as our agent in matters pertaining to the attached application.

(Property Owner)

(Property Owner)

Subscribed and sworn to me this _____ day of _____ 20__.

(Notary Public)

Residing in: _____

My Commission Expires: _____