ZONING PERMIT APPLICATION

This is an application to the Zoning Coordinator to grant a Zoning Compliance Permit, Variance Request, Conditional Use Permit, Zone Change or District Map Amendment to ensure that any construction projects are in accordance with the appropriate zoning regulations.

INSTRUCTIONS:
All applications shall be submitted at the Park County Planning Department. Any necessary filing fee must accompany the application. Please refer to the zoning regulations for fee schedules. All questions must be answered fully (as applicable). Please type or print. You may attach further pages if additional space is needed. Please Note: If a submitted application is missing information and/or a formal follow-up request from the Zoning Administrator is not addressed for a period of more than thirty working days, the submitted application will be considered null and void and the applicant will be required to resubmit the application and associated fee(s):

- Complete the application fully:
  - This includes full legal description of the property including the subdivision, block number, lot number, quarter section, Section, Township, and Range.
  - Be as specific as possible in describing the proposed building, if applicable.
  - Parking starts at a minimum of two spaces for a residence. For the parking requirements for other uses and types of structures, see the Zoning Coordinator.
  - Be sure to include the zoning on your property. Maps are located in the Planning Office for reference.
  - Variance, Conditional Use, Zone Change or District Map Amendment: Applicants must include the names and mailing addresses of all adjoining property owners and address all specific review criteria outlined in the applicable zoning regulations and section.

- Prepare a dimensioned site plan of the property which includes, but is not limited to the following:
  - The location and dimension of all vehicular points of ingress and egress, drives, and off-street parking spaces.
  - The location and dimension of all existing and proposed buildings, structures and improvements including those which will be removed. Please label all information.
  - North arrow, scale, property lines, setbacks between buildings and property lines, and setbacks between buildings and other structures.
APPLICATION FOR A (please choose below):
- Zoning Compliance Permit
- Variance Request
- Conditional Use Permit
- Zone Change
- District Map Amendment

The undersigned hereby makes application for permission to erect, construct, alter, move a building or structure within the:
- County Jurisdictional Area
- East Yellowstone Zoning District
- Cokedale Zoning District
- Cooke City, Silver Gate, Colter Pass Zoning District
- O’Rea Zoning District
- Paradise Valley Zoning District
- Other _______________________________________________

Name of Property Owner(s):________________________________________________
Phone Number: __________________________________________________________
Mailing Address:  ________________________________________________________
Address of project:  _______________________________________________________
Legal location of building project: Subdivision _________________________________
Zoning _____; Lot ______________; Section _____; Township _____; Range ______
Description of construction, alteration, etc.:
Type of Building/Structure: ___________________________________________
Number of Dwelling Units: ___________________________________________
Basement: __________  Half: ______________ Full: ___________
Garage: ____________ Attached: ___________ Detached: ___________
Other: ____________________________________________________________
Height of Structure:__________
Distance to Property Lines: Front: ___________ Side: ___________
Side: _______ Rear: ___________
Distance to mean high water of Stream/River (if applicable)_______________________
Off-Street Parking Spaces: _________________________________________________
Proposed Completion Date: ________________________________________________
Will the project be within the Special Flood Hazard Area (SFHA) (Attach Digital Flood Insurance Rate Map including distance from proposed structure to SFHA)? YES  NO
Will project be connected to a septic system (If yes, attach septic permit)? YES  NO
This permit becomes null and void if work or construction authorized is not commenced within six months and work completed within a reasonable time.

I certify that information presented is true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

____________________________________   _____________________________
(Contractor or Authorized Agent)   (Date)

____________________________________   _____________________________
(Owner Signature, if Builder)   (Date)

**Office Use Only**

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