

PROVIDENCE CITY APPLICATION

Please note that each request has a checklist which specifies what information is required in order for your application to be complete and ready for processing. **Incomplete applications will not be processed.** Please check the appropriate box for your type of application. Check only one box. Each application type requires a separate application. If you have questions, please ask.

Development Review Committee, and/or Planning Commission, and/or City Council

- | | | |
|------------------------------------------|-------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> Annexation | <input type="checkbox"/> Final Plat | <input type="checkbox"/> Rezone |
| <input type="checkbox"/> Code Amendment | <input type="checkbox"/> General Plan Amendment | <input type="checkbox"/> Right-of-way Vacation |
| <input type="checkbox"/> Concept Plan | <input type="checkbox"/> Preliminary Plat | <input type="checkbox"/> Site Plan |
| <input type="checkbox"/> Conditional Use | | |

Board of Adjustment

- | | | | |
|---------------------------------|-----------------------------------------------------------|--------------------------------------------|-----------------------------------|
| <input type="checkbox"/> Appeal | <input type="checkbox"/> Expansion of a Nonconforming Use | <input type="checkbox"/> Special Exception | <input type="checkbox"/> Variance |
|---------------------------------|-----------------------------------------------------------|--------------------------------------------|-----------------------------------|

Applicant's Name: _____

Address: _____

Phone(s): _____

Fax: _____

E-Mail: _____

Party Responsible for Payment: _____

Billing Address: _____

Phone(s): _____

Fax: _____

E-Mail: _____

Property Owner's Name (how it appears on a legal document): _____

Address: _____

Phone(s): _____

Fax: _____

E-Mail: _____

Architect/Engineer/Surveyor's Name: _____

Address: _____

Phone(s): _____

Fax: _____

E-Mail: _____

Cache County Property Number(s): _____

Total Acreage: _____

Project Name: _____

I declare under penalty of perjury that I am the owner or authorized agent for the property which is the subject of application, and that the statements, answers, and documents submitted in connection with this application are true and correct to the best of my knowledge.

Signature of Applicant: _____

Date: _____

Do not complete below this line, for office use only.

Application Fee: _____

Receipt Number: _____

General Plan: _____

Zone: _____

Received By: _____

Date Stamp: _____