



Beaver City

PLANNING AND ZONING COMMISSION

Conditional Use Permit

Planning or Zoning Change

Plot Plan (See below for additional information)

NAME: _____

ADDRESS: _____

PHONE: _____ Email: _____

Person or Agent Representing Above: _____

Address: _____ Email: _____

PROPERTY ADDRESS: _____

REASON FOR CHANGE: (Give a detailed description of your project)

TOTAL AREA OF PROJECT (Square footage or acres) outside dimensions of all structures.

Present Zone: _____

Estimated Time Permit Will Be used (Permit must be renewed each year) _____

PLOT PLAN:

• Application name: _____

• Site Address: _____

• Property Boundaries and dimensions

• Layout of existing and proposed buildings and parking area.

Residential: provide floor plan of entire home (include primary and accessory dwellings)

Commercial: provide an accurate and complete description of proposed business activities.

Other information or documentation as staff or Planning Commission require:

SIGNATURE OF APPLICANT: _____

FEE PAID: _____

DATE: _____

RECEIPT #: _____

PUBLIC HEARING DATE: _____