



# Ordinance Amendment Application

**\*All sections of this application must be filled out and fees paid upon submittal or application will be deemed incomplete.**

Type of Amendment:       Zoning Ordinance       Subdivision Ordinance

Existing Ordinance Section Proposed for Amendment: \_\_\_\_\_

Existing Ordinance Section Language: Attach a copy of the portion of the ordinance with the section clearly identified.

Proposed Ordinance Section Language Changes: Attach proposal clearly identifying proposed new language from existing language by underlining new language and using ~~strikethrough~~ to denote any existing language proposed for deletion.

Narrative describing rationale for proposed change (or attach a typed version): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

### Applicant Certification:

I certify under penalty of perjury that this application and all information submitted as a part of this application is true, complete, and accurate to the best of my knowledge. I also acknowledge that I have reviewed the application and that items and checklists contained in this application are basic and minimum requirements only and that other requirements may be imposed that are unique to individual projects or uses. I agree also to comply with any and all applicable City Ordinances in effect at this time. Should any of the information or representations submitted in connection with this application be incorrect or untrue, I understand that Brigham City may rescind any approval, or take any other legal or appropriate action. I also understand the applicant may be billed for engineering fees in excess of one hour and will be responsible for repayment of those fees.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please note:** Attendance at Planning Commission and City Council meetings is required by the applicant or a representative. It is the applicant's responsibility to call for meeting dates and times.

### Office Use Only

Application # \_\_\_\_\_  
Date Received \_\_\_\_\_  
PH Mtg Date \_\_\_\_\_  
CC Mtg Date \_\_\_\_\_

Filing Fee \$100.00<sup>c</sup>  
Receipt Number \_\_\_\_\_

<sup>a</sup> This fee includes 1-hour of Engineer fees (no refund for projects taking less than 1-hour).  
<sup>b</sup> Engineering fees in excess of 1-hour will be reimbursed by the applicant monthly to the City for the actual cost. A financial guarantee shall be made to the City through a cash deposit in the amount of \$500 due at the time of application. Upon final completion of the project, this guarantee will be refunded to the applicant upon final approval of the City and payment of the final engineering bill.  
<sup>c</sup> Applicable Engineering fees in excess of 1-hour will be reimbursed by the applicant monthly to the City for the actual cost.