



Town of Apple Valley
1777 N. Meadowlark Drive, Apple Valley, Utah 84737
Phone: (435) 877-1190 Fax: (435) 877-1192
www.applevalleyut.gov

Conditional Use Permit Application

Date Received: _____
(Office use Only)

Name of Applicant: _____
Telephone Number : _____
Mailing Address: _____
Street
City , State Zip Code

Legal Description of Property where Conditional Use Permit is Requested: _____

The applicant shall submit the following information pertaining to the above: (All in formation will be required seven days prior to the Planning Commission Meeting in order to be placed in the agenda.)

- Site plan, drawn to scale and showing all proposed and existing buildings, fences, landscaping, parking, loading areas, etc.
- Topography for irregular sites and drainage.
- Current deed showing ownership. (If applicable, deed showing it was a lot of this size prior to 1992, or deed showing lot size prior to 1972, having “grandfathered” status.)
- Proof of access.
- Verification of water (quantity and quality Well of Stock Certificate).
- Septic Permit.
- Other information specifically requested by the Planning Commission.

Filing Fee: _____ Date Approved: _____
(Office use Only)