

GARLAND CITY APPLICATION FOR ZONING AMENDMENT OR BUILDING CODE AMENDMENT

APPLICATION SUBMITTAL REQUIREMENTS

Please read the applicable sections of the Garland City Building Code and Zoning Regulations/Map in detail before submitting any type of project application. Attach to the application all necessary documentation as per the following Checklist. Missing information may be cause for denial of application.

The following items, at a minimum, shall be included with the application for any Building Code and/or Zoning Regulations/Map or Amendment:

- 1) _____ A description of the specific amendment to the Building Code Text and/or Zoning Regulations/Map which addresses the following issues:
 - a) _____ The reason and justification for the proposed amendment.
 - b) _____ Consistency of the proposed amendment with the goals and policies of the Garland City General Plan.
 - c) _____ Compatibility of the proposed zone with the existing land uses of nearby and adjoining properties.
 - d) _____ The effect of the proposed amendment on the character of the surrounding area, and whether a change in the uses allowed for the affected properties will unduly affect the uses, or proposed uses for nearby and adjoining properties;
 - e) _____ The gain to the public health, safety and welfare and overall community benefit from the existing classification to the proposed amendment.

- 2) _____ Supporting documentation, maps, studies and any other information which would allow the City Council to make a well-informed decision.

- 3) _____ A legal description of the property proposed for a Zoning Map Amendment. If the Amendment includes two or more parcels, a survey of the property included in the proposed amendment may be required by the City. If a survey is required, the applicant shall submit a copy of the survey and indicate the name and phone number of the surveyor.

- 4) _____ As a courtesy to property owners, all applicants for a Zoning Map Amendment shall provide the City with stamped and preaddressed envelopes (#10 business size) for each owner of record of each parcel located entirely or partly within three hundred (300) feet from any boundary of the property subject to the application, including any owners of property in unincorporated Box Elder County or adjacent municipalities, together with a mailing list for those owners. The names and addresses shall be as shown on the most recently available Box Elder County tax assessment rolls. It shall be the sole responsibility of the applicant to verify that the mailing list and envelopes are complete and accurate.

Name of Applicant: _____ Authorized Agent (if applicable): _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Mobile Number: _____ Fax Number: _____

Email: _____

Address of Proposed Amendment: _____ Acres: _____

Tax I.D./Parcel # (s) _____

Current Zoning Assignment: _____ Proposed Zoning Assignment: _____

Is the amendment consistent with the General Plan? Yes: _____ No: _____

APPLICANT(S) CERTIFICATION

I (we) 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. Should any of the information or representations submitted in connection with this application be incorrect or untrue, I (we) understand that Garland City may rescind any approval, or take any other legal or appropriate action. I (we) also acknowledge that I (we) have reviewed the applicable sections of the Garland City Building Code and Zoning Regulations 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 (we) also agree to allow the Staff, Planning Commission, or City Council or appointed agent(s) of the City to enter the subject property to make any necessary inspections thereof.

Applicant's Signature: _____ Title: _____ Date: _____

(If the proposed Amendment involves more than one property owner, please include the signatures of each owner below)

Owner Name: _____ Phone: _____ Tax I.D./Parcel # (s): _____

Current Zone Assignment _____ Proposed Zone Assignment: _____

Address: _____ Signature: _____

Owner Name: _____ Phone: _____ Tax I.D./Parcel # (s): _____

Current Zone Assignment _____ Proposed Zone Assignment: _____

Address: _____ Signature: _____

Owner Name: _____ Phone: _____ Tax I.D./Parcel # (s): _____

Current Zone Assignment _____ Proposed Zone Assignment: _____

Address: _____ Signature: _____

Each owner and signer for himself says: I have personally signed this Application; I am aware of the requested Zoning Amendment and understand the terms and conditions of this Application; I am an owner of a portion of the property above mentioned and located within Garland City, Box Elder County, State of Utah, and my post office address is correctly written after my name. Attach additional sheets as necessary.

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 ascertain meeting dates and times. Fee payment is required at time of application submittal.

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| For Office Use Only: | | |
| File #: _____ | Application Date: _____ | Project Name: _____ |
| Fee: _____ | Date Paid: _____ | Receipt Number: _____ |