



# Subdivision Application

## Planned Unit Development (P.U.D.)

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

Name of Subdivision: \_\_\_\_\_ Address of Property: \_\_\_\_\_

Tax ID/Parcel Number: \_\_\_\_\_ Current Zoning: \_\_\_\_\_ Number of Lots: \_\_\_\_\_ Total Area/Acres/Sq Ft: \_\_\_\_\_

Existing Use of Property: \_\_\_\_\_ Proposed Use of Property: \_\_\_\_\_

Project Description: \_\_\_\_\_

**Name(s) of Applicant(s) or Authorized Agent(s):** \_\_\_\_\_

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

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

**Name(s) of Property Owner(s) (if other than applicant):** \_\_\_\_\_

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

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

**Name of Architect/Engineer:** \_\_\_\_\_ Company: \_\_\_\_\_

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 Brigham City Subdivision Ordinance 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 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. I also understand the property owner or the authorized agent will 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 # _____	Base Fee (up to five lots)	\$500.00 <sup>a</sup>
Date Received _____	add'l lots ____ x \$10.00	\$ _____
PH Mtg Date _____	Engineering Deposit	\$500.00 <sup>b</sup>
CC Mtg Date _____	Total	\$ _____
	Receipt Number	_____
	Deposit work order 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.

**PROPERTY OWNER**

\* IMPORTANT - ALL property owners of record MUST sign this form – use additional forms as necessary

I, (we) \_\_\_\_\_, declare that I, (we) am (are) the owner(s)\* of the property identified in the attached application.

\*May be owner of record, contract owner, party to valid real estate purchase contract, party to valid earnest money agreement, option holder or have other legal control of property.

\_\_\_\_\_  
(Property Owner)

\_\_\_\_\_  
(Property Owner)

State of \_\_\_\_\_

County of \_\_\_\_\_

On \_\_\_\_\_, 20\_\_\_\_, \_\_\_\_\_ personally appeared before me,

\_\_\_\_\_ who is personally known to me  
\_\_\_\_\_ whose identity I proved on the basis of \_\_\_\_\_  
\_\_\_\_\_ whose identity I proved on the oath/affirmation of \_\_\_\_\_,  
a credible witness

the signer of the above document, and he/she acknowledged that he/she signed it.

\_\_\_\_\_  
Notary Public

**PROPERTY OWNER PERMISSION**

\*IMPORTANT - ALL property owners of record MUST sign this form – use additional forms as necessary

I, (we) \_\_\_\_\_, the owner(s) of the property described in the attached application, give \_\_\_\_\_ permission to use the property listed in the attached application for the purpose named in the attached application.

\_\_\_\_\_  
(Property Owner)

\_\_\_\_\_  
(Property Owner)

State of \_\_\_\_\_

County of \_\_\_\_\_

On \_\_\_\_\_, 20\_\_\_\_, \_\_\_\_\_ personally appeared before me,

\_\_\_\_\_ who is personally known to me  
\_\_\_\_\_ whose identity I proved on the basis of \_\_\_\_\_  
\_\_\_\_\_ whose identity I proved on the oath/affirmation of \_\_\_\_\_,  
a credible witness

the signer of the above document, and he/she acknowledged that he/she signed it.

\_\_\_\_\_  
Notary Public

POSTMASTER



Date: 2/28/2017

To:  
Mark Bradley  
City Planner  
Brigham City Corporation

SUBJECT: New Development Requirements

Effective immediately the USPS Salt lake City District requires all future developments to provide accommodations for centralized mail delivery. The Postal Service will not furnish, install the Central Box Units (CBU), or pour the required concrete pads to anchor them. Costs for centralized units should be included in the design and expense of the development.

The Post Office does not recommend specific CBU vendors and does not maintain keys for newly established development. Key maintenance will be the responsibility of the landlord. The Postal Service will, however, change keys in private CBU units for a current fee of \$40.00. The key service charge is subject to change with future rate adjustments.

We encourage city planners to include these requirements in local ordinance to avoid any future misunderstanding.

Sincerely,

*Gordon Cole*

Gordon Cole  
Postmaster  
Brigham City UT 84302-9998