



CONDITIONAL USE PERMIT APPLICATION

West Bountiful City
PLANNING AND ZONING
550 N 800 W, West Bountiful, UT 84087
Phone: (801) 292-4486
Fax: (801) 292-6355
www.wbcity.org

PROPERTY ADDRESS: _____

PARCEL NUMBER: _____ **ZONE:** _____ **DATE OF APPLICATION:** _____

Name of Business: _____

Applicant Name: _____

Applicant Address: _____

Primary phone: _____ Fax Number: _____

E-mail address: _____

Describe in detail the conditional use for which this application is being submitted. Attach a site plan which clearly illustrates the proposal. A separate sheet with additional information may be submitted if necessary.

The Applicant(s) hereby acknowledges that they have read and are familiar with the applicable requirements of Title 17.60 of the West Bountiful City Code, pertaining to the issuance of Conditional Use Permits. If the applicant is a corporation, partnership or other entity other than an individual, this application must be in the name of said entity, and the person signing on behalf of the Applicant hereby represents that they are duly authorized to execute this Application on behalf of said entity.

Fee must accompany this application - \$20 for Residential Zone, \$50 for Business Zone

I hereby apply for a Conditional Use Permit from West Bountiful City in accordance with the provisions of Title 17, West Bountiful Municipal Code. I certify that the above information is true and correct to the best of my knowledge. I understand the information on this application may be made available to the public upon request.

Date: _____ Applicant Signature: _____

FOR OFFICIAL USE ONLY

Application Received Date: _____

Permit Number: _____

Application Fee Received Date: _____

Fire Inspection Date: _____

Permit Approval: _____