

CITY OF HAYDEN LAKE SPECIAL USE PERMIT

in Overlay District)

APPLICATION(Limited Professional Offices & Restaurant

PLEASE SUBMIT TO: deputyclerk@cityofhaydenlake.us 9393 North Strahorn Road Hayden Lake, ID 83835 208 772-2161

SUBMITTALS

An application for Special Use Permit (Permit) for limited professional offices or restaurant in an Overly Zoning District is made by submitting the following information to the City Clerk:

- 1. Completed attached form and checklist;
- 2. Copy of all required documents including an accurate scale drawing of the site including any affected adjacent property and showing the location of all existing and proposed structures, the maximum dimensions of all existing and proposed buildings, streets, easements, property lines, setbacks, driveways, pedestrian walkways, off-street parking, off-street loading facilities and landscaped areas, buffering or other similar elements of site design.
- 3. An ownership list identifying property owners and residents within the subject property and within a radius of three hundred feet (300') from the external boundaries of the property.

DEADLINE FOR SUBMITTALS

The completed form and documents must be submitted to the City Clerk's Office not later than twenty-five (25) days prior to the date of a regular City Council meeting where a public hearing to consider the variance request can be set. The completed application shall be deemed accepted for the twenty-five (25) day processing period as of the date when all maps are and information have been filed, checked and accepted as complete by the City Clerk's Office, as noted below. This item will not be set for Council consideration until the application is complete and accepted.

FEES

The applicant shall pay to the City a fee of \$100.00. The applicant shall also pay the estimated costs to reimburse the City for the cost of all services provided by the City Engineer, City Attorney and other City Officials as well as other direct costs associated with processing the application including the costs of mailing and publishing notices.

Date Application and Fee Received:		, 20,	
	by City Clerk's Office:		
	Date Application Accepted as Complete:	, 20	
	by City Clerk's Office:		
Please type or print the followi	ng required information:		
APPLICANT:			
Name of Applicant:			
Mailing Address:			
Telephone Number:			



CITY OF HAYDEN LAKE SPECIAL USE PERMIT

APPLICATION
(Limited Professional Offices & Restaurant in Overlay District)

PLEASE SUBMIT TO: deputyclerk@cityofhaydenlake.us 9393 North Strahorn Road Hayden Lake, ID 83835 208 772-2161

FILING CA	APACITY:
1.	Recorded property owner as of
2.	Purchasing (under contract) as of
2.	(date)
4.	The authorized agent of any of the foregoing, duly authorized in writing. (Written authorization must be attached to the application)
Architect, E	ngineer and/or other professional assisting with application:
Nam	e of Applicant:
Mail	ing Address:
Tele	phone Number:
PROPERT	Y:
Legal descri	ption of property including all adjacent streets:
Existing lan	d use:
	g land use:
	ning:
	ning:
	isdiction city or county:
	ea of City Impact:
	DISTRICTS PROVIDING SERVICES TO THE PROPERTY:
Sewage Dis	
	ly
Fire District	
	strict
	rict
Nearest City	
	ounty
Other	



CITY OF HAYDEN LAKE SPECIAL USE PERMIT APPLICATION

(Limited Professional Offices & Restaurant in Overlay District)

PLEASE SUBMIT TO: deputyclerk@cityofhaydenlake.us 9393 North Strahorn Road Hayden Lake, ID 83835 208 772-2161

T) I	•	• 4 4	4 •	1 .1	•		4
Please	give a	wriften	narrative	descrit	ning va	nır rean	est:
1 ICHSC	51,000	*** 1 1 1 1 1 1 1 1 1 1	man native	acseria	,,,,,	ui icqu	·CDC

1.	What conditions warrant annexation and the zoning designation requested?				
2.	How would the annexation and zoning advance the public health, safety, and welfare of the citizens of the City of Hayden Lake?				
3.	What, if any, detrimental effect would the request have on adjacent property and improvements?				
4.	What would be the effect on the Comprehensive Plan?				
5.	What is the intended use of the property following zoning and annexation?				
6.	Why it would be in the best interest of the city to approve this request for annexation and zoning?				
7.	What special conditions or contingencies should be applied to approval of this request for annexation and zoning?				
8.	Any other justification you feel is important and should be considered by the Council?				



CITY OF HAYDEN LAKE SPECIAL USE PERMIT APPLICATION

(Limited Professional Offices & Restaurant in Overlay District)

PLEASE SUBMIT TO: deputyclerk@cityofhaydenlake.us 9393 North Strahorn Road Hayden Lake, ID 83835 208 772-2161

CERTIFICATION

, being first duly sworn, deposes and says that application and knows the contents thereof to be true to knowledge.	is the applicant in this
Signed:	
SUBSCRIBED and SWORN to before me this day of	, 20
Notary Public in and for the State of I	[daho
Residing at	
Commission Expires:	



CITY OF HAYDEN LAKE SPECIAL USE PERMIT APPLICATION

(Limited Professional Offices & Restaurant in Overlay District)

PLEASE SUBMIT TO: deputyclerk@cityofhaydenlake.us 9393 North Strahorn Road Hayden Lake, ID 83835 208 772-2161

I have read and consent to the filing of this application as the owner of record of the area being considered in this application.

Name: Address:			
Phone #:			
Signature:			