



## CLARKSTON, Utah

Founded 1864

### Concept Plan Application

Proposed Project Name \_\_\_\_\_

Address of Subject Property \_\_\_\_\_

County Tax Parcel # \_\_\_\_\_

Name of Property Owner \_\_\_\_\_ Phone \_\_\_\_\_

Name of Applicant \_\_\_\_\_ Phone \_\_\_\_\_

Applicant email \_\_\_\_\_ Zoning of Property \_\_\_\_\_

Preliminary plat requirements shall be submitted to the planning commission at least fourteen (14) days prior to the planning commission meeting. (NOTE: Scheduling of the case shall be dependent upon adequacy of data provided to the Town.)

#### **1 - CONCEPT PLAN SUBMITTAL**

A digital version of the proposed concept plan may include the following items:

\_\_\_\_\_ The proposed name of the subdivision;

\_\_\_\_\_ Approximate acreage of subdivision

\_\_\_\_\_ Map of proposed subdivision, with property boundaries.

\_\_\_\_\_ Zoning for subdivision

\_\_\_\_\_ The names of adjacent property owners;

\_\_\_\_\_ Existing and proposed street layout;

\_\_\_\_\_ Location and size of water sewer and storm water utilities;

\_\_\_\_\_ Proposed lot layout including typical lot size;

\_\_\_\_\_ North arrow;

\_\_\_\_\_ Minimum scale one-inch equals one hundred feet (1" = 100')

*I hereby certify that this Application is true and complete, to the best of my knowledge. I agree that in submitting this Application, I agree to abide by all applicable federal, state, and local rules, regulations and ordinances that govern subdivision development in Clarkston Town.*

Date submitted: \_\_\_\_\_

Signature of applicant: \_\_\_\_\_

Name of applicant: (Print) \_\_\_\_\_

**All digital files must be received by Clarkston Town at [clarkstonpz@clarkstonutah.org](mailto:clarkstonpz@clarkstonutah.org) before the application will be accepted.**

Date application accepted: \_\_\_\_\_

Application accepted by: \_\_\_\_\_

Amount \$ \_\_\_\_\_

Receipt # \_\_\_\_\_