

Conditional Use Permit Application

Appli	cants Information	•		
Name	e of Applicant:			
Mailir	ng Address:			
City:		State:	Zip:	
Phone	e Number:			
Prop	erty Information:			
Prope	erty Address/Locati	on:		
	el Number:			
Zonin	g District:			
Prope	erty Owner(if differe	nt than applicant):		
Owne	er's Address:			
1.	Describe the prop	osed use:		
2.	How does the pro	posed use align with the	e zoning requiremer	its of the property?
3.	Explanation of wh district:	y the proposed use is n	ot a standard permi	tted use in zoning

4.	List any structures, modifications, or Improvements associated with the proposed use:
5.	Days and hours of operation (if applicable):
6.	Anticipated traffic, noise, or environmental impacts:

Supporting Documentation:

The following documents are required for submission with this application:

- Site plan detailing property boundaries, existing structures, and proposed structures.
- Vicinity map showing surrounding land uses.
- A written narrative explaining how the proposed use will comply with all applicable Fairfield ordinances.
- Any additional studies, reports, or plans (e.g., traffic study, environmental analysis) as requested by the Planning Commission.
- Measures to mitigate potential negative impacts (noise, traffic, aesthetics, odors)
- Proof of property ownership or a letter of authorization from the property owner if the applicant is not the owner.

Conditions and Requirements:

- All conditional uses must comply with the Fairfield Land Use Ordinance.
- The applicant is responsible for obtaining all necessary permits and approvals from other agencies or entities.
- The Planning Commission may impose additional conditions to ensure the proposed use is compatible with surrounding properties.
- The permit is subject to review and potential revocation if any conditions of approval are violated.

• Public Notice sent to the surrounding areas within 300 feet. Ask Fairfield town clerk for information.

Application Fees:

•	Application	Fee: \$	_ (non-refundable
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- Additional fees may be required for technical reviews or public hearings.
- Public Notice fee

Acknowledgement:

By signing below, the applicant affirms that all information provided in the application and accompanying documents is true and accurate to the best of their knowledge. The applicant agrees to comply with all applicable laws and ordinances and acknowledges that incomplete applications may delay processing.

pplicant's Signature:	_
ate:	
roperty Owner's Signature:	
ate:	

For Office Use Only						
Date:	/					
	TI permit completed: permit By:	# Date:				
	Application fees paid					
	Hearing Date:	(attach Public notice)				
	Fire Inspection completed: D	Oate By:				
	Fire Inspection fee paid					
	Utah County Health Department Approval Number					
	Zoning:					
	Water Share Number:					
		roved: Denied: D				
	Town Council: Approved: _	Denied: Date:				
	Comments:					
Cond	ition of Approval (if any):					
	☐ Total Fees:	Paid:				
	☐ CUP #:					
	<u> </u>					
Plann	ing Commission Signature:					
Date:						
	Title	Signature	Date			