

PRE-APPLICATION FORM

For Office Use Only:	
Date Received:	Date of Meeting:
Applicant Information (primar	y contact for this project)
(Print Name)	(Sign)
Phone number:	Email:
Mailing address:	
Owner Information	(Please print legibly)
Owner information	
(Print Name)	
Phone number:	Email:
Mailing address:	
	(Please print legibly)
Property Information	
Legal Description:	
Parcal ID Number (PIN):	
raicei ib Nullibei (Filv).	
Township:	Range: Section:
Total Acreage:	Current Use:
-	
Project Description	



This form must be submitted in order to schedule a pre-application meeting. The purpose of this meeting is to help the Planning Division understand the intent, goals, and objectives of the project. Applicants will be contacted by phone or email to schedule a meeting. Applicants will be provided information as to how this request does or does not comply with current Zoning Ordinance and Subdivision Regulations and how the project may be altered to bring it into compliance. The purpose of this meeting is not to gain pre-approval of any project.

All supporting materials must be submitted at the time of application. Additional information requested by the Planning Division may be sent by mail or e-mail. No application will be processed or scheduled for a public hearing if it is incomplete.

If the applicant is a corporation, LLC, an attorney, realtor or someone other than the owner, the name of the application shall remain consistent throughout the supporting materials.

Please provide the following information with this form:

- Site plan,
- Plat or survey,
- Copies of state permits if applicable,
- Any information necessary to help us better understand your project.