

Conditional Use Permit Application

City of New Plymouth 301 N Plymouth Ave/PO Box 158 New Plymouth, Idaho 83655 Phone : (208)278-5338 Fax: (208)573-5330

Danielle Painter, Zoning Administrator <u>clerk@npidaho.com</u>

Alishia Elliott, Secretary deputyclerk@npidaho.com

APPLICANT:			
Address:			
Mailing Address:			
Telephone:	Fax:	E-mail:	
FILING CAPACITY:			
Recorded property owner as of			(Date)
Purchasing as of			(Date)
Leasing property as of			(Date)
Authorized age	nt of any of the foregoing, d	luly authorized in writing.	
(1	Written authorization must	be attached.)	
ENGINEER/ARCHITECT:			
Name:			
Address:			
Telephone:	Fax:	E-mail:	
LEGAL DESCRIPTION OF F	PROPERTY: (Attach if necessa	ary)	
ZONE CLASSIFICATION: _			
EXISTING USE:			
DESCRIPTION OF PROPOS	SED CONDITIONAL USE:		

SITE PLAN: Submit a site plan showing the location of all buildings, parking and loading areas, traffic access and traffic circulation, open spaces, landscaping, refuse and service areas, utilities, signs, yards and such other information as the Commission may require to determine if the proposed use meets the intent and requirements of City Code.

NARRATIVE STATEMENT: Submit a narrative statement addressing any effects on adjoining properties including noise, glare, odor, fumes and vibration. Discuss the general compatibility with adjacent and other properties in the zone and the relationship of the proposed use to the Comprehensive Plan.

COMMISSION EVALUATION: The commission shall review the particular facts and circumstances of each proposed conditional use in terms of the standards as prescribed by Section 11-16-3 of the New Plymouth Municipal Code.

FILING FEE: \$125.00

I hereby certify that I have been informed and am aware that a conditional use is personal in nature and does not run with the land.

APPLICANT'S SIGNATURE		DATE:
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