

TOWN OF SUGAR CITY
PO BOX 69, 205 COLORADO
SUGAR CITY, COLORADO 81076

APPLICATION FOR CHANGE IN ZONING AND / OR VARIANCES

PROPERTY OWNER INFORMATION:

NAME: _____
ADDRESS: _____
CITY, STATE, ZIP: _____ PHONE # () _____

APPLICANT INFORMATION (IF DIFFERENT FROM OWNER):

NAME: _____
ADDRESS: _____
CITY, STATE, ZIP: _____ PHONE # () _____

EXISTING ZONING DISTRICT CLASSIFICATION: _____

LEGAL DESCRIPTION OF PROPERTY:

TOWNSITE/ADDITION _____ BLOCK _____ LOT/S _____
STREET ADDRESS: _____

DESCRIBE EXISTING USE OF PROPERTY: _____

DESCRIBE PROPOSED USE OF PROPERTY: _____

SPECIFY REASON(S) FOR REQUEST AND ANY OTHER SUPPORTING INFORMATION: _____

*NOTE:

1). A plot plan showing all existing structures shall accompany this application with any proposed changes indicated.

2). A list containing all property owners within 300 feet of exterior boundaries of property in question shall accompany this application with names and addresses indicated.

3). Applicant should be present at the meeting of the Sugar City Planning Commission when this application is to be considered.

* (IF NECESSARY)

TO: TOWN OF SUGAR CITY BOARD OF TRUSTEES

BY RESOLUTION AT A MEETING HELD _____, 19____, THE SUGAR CITY PLANNING COMMISSION RECOMMENDED THAT THIS REQUESTED ZONING/VARIANCE CHANGE BE:

APPROVED ()

DENIED ()

APPROVED WITH THE FOLLOWING MODIFICATIONS ()

SECRETARY

TOWN OF SUGAR CITY BOARD OF TRUSTEES

- () APPROVAL OF PLANNING COMMISSION'S ACTION.
- () REFUSES TO DENY THE PETITION FOR AMENDMENT.
- () REJECTS AMENDING REGULATION.

DATE: _____, 19____

MAYOR, TOWN OF SUGAR CITY