

Town of Dutch John



PO Box 235
Dutch John, UT 84023
www.dutchjohn.org

For Office Use Only:

Date Received: _____	Fee: _____
Received By: _____	Receipt No: _____
Date Reviewed: _____	File No: _____
Information Complete: <input type="checkbox"/> Y <input type="checkbox"/> N	

CONDITIONAL USE PERMIT

Short Term Rental Bed & Breakfast Other _____

Name: _____ Telephone: _____

Address: _____

Email Address: _____ Fax: _____

Agent (if applicable): _____ Agent's Phone: _____

Address of Subject Property: _____

Tax ID of Subject Property: _____ Zone: _____

This application shall be accompanied by the following:

Applicant

Staff

- | | | |
|--------------------------|---|--------------------------|
| <input type="checkbox"/> | 1. A vicinity map showing the general location of the application property. | <input type="checkbox"/> |
| <input type="checkbox"/> | 2. Three (3) copies of a plot plan showing the following: | <input type="checkbox"/> |
| | <input type="checkbox"/> Property Boundaries, dimensions and existing streets. | |
| | <input type="checkbox"/> Location of existing and proposed building, parking, landscaping and utilities. | |
| | <input type="checkbox"/> Adjoining property lines and uses within 100 feet of subject property. | |
| <input type="checkbox"/> | 3. A reduced copy of all plans (8.5" x 11" if readable or 11" x 17") if original plans are larger. | <input type="checkbox"/> |
| <input type="checkbox"/> | 4. Building elevations for new construction, noting proposed materials and colors. | <input type="checkbox"/> |
| | If so include a copy of the building permit application and packet. | <input type="checkbox"/> |
| <input type="checkbox"/> | 5. Applicant's responses to Conditional Use Permit standards for review (attached). | <input type="checkbox"/> |
| <input type="checkbox"/> | 6. Warranty deed, preliminary title report, or other document (see Affidavit of Property Owner attached) showing evidence that the applicant has control of the property. | <input type="checkbox"/> |
| <input type="checkbox"/> | 7. Building Official Inspection Report. | <input type="checkbox"/> |
| <input type="checkbox"/> | 8. Receipt or paid invoice showing payment of all applicable fees. | <input type="checkbox"/> |
| <input type="checkbox"/> | 8. Proof that all taxes (sales and property taxes) and fees are paid. | <input type="checkbox"/> |

NOTE: It is important that all applicable information noted above is submitted with the application. An incomplete application will not be scheduled for Planning & Zoning Commission consideration. Once your application is deemed complete, it will be put on the agenda for the next Planning Commision Meeting.

PURPOSE

The purpose of a conditional use permit is to allow flexibility in zoning by permitting a discretionary review of a project or use that by its character may not be compatible with uses which are permitted in the zone and allowing such use when it can be found to be compatible with the neighborhood in which it is located. Conditional Use Permits may be issued as provided by the Dutch John Planning and Zoning Ordinance for any of the uses for which a Conditional Use Permit is required as identified in the Table of Uses.

WHEN REQUIRED

The Conditional Use Permit is primarily required whenever the Land Use Ordinance specifies the use as a conditional use. It is also used for other specified situations, such as allowing building heights that exceed the maximum allowed within the zone.

REFERENCE, DUTCH JOHN PLANNING AND ZONING ORDINANCE

CHAPTER 8 - SECTION 801: ISSUANCE AND PURPOSE

SECTION 802: APPLICATION REQUIREMENTS

SECTION 803: CONDITIONS FOR APPROVAL

SECTION 804: FINDINGS AND CONDITIONS

SECTION 805: REVOCATION OR MODIFICATION OF A CONDITIONAL USE PERMIT

SECTION 806: PROCEDURE FOR APPLICATION, REVOCATION OR MODIFICATION OF A CONDITIONAL USE PERMIT

SECTION 807: SHORT TERM RESIDENTIAL UNIT AS A CONDITIONAL USE

SECTION 808: BED AND BREAKFAST INN AS A CONDITIONAL USE

Fee: \$250 / Review: \$50

PLEASE SEE ATTACHED ADDENDUM FOR SHORT-TERM RESIDENTIAL RENTAL UNIT AS A CONDITIONAL USE

APPLICATION FOR SHORT-TERM RESIDENTIAL RENTAL UNIT AS A CONDITIONAL USE

NOTICE: Please complete each statement below. Incomplete applications will not be accepted.

Property Owner Information

Owner Name(s): _____

Mailing Address: _____

City, State, Zip: _____

Telephone: _____ Cellphone: _____

Email Address: _____

Type of Ownership: Individual(s) Partnership Trust LLC Other: _____

*A list of all corporate officers or partners must be included. This list must include, name, home address and phone numbers.

TYPE OF RENTAL MANAGEMENT:

Owner Manages Only Rental Agent & Owner Manages Rental Agent Manage Only

Rental Property Address: _____

Sales Tax Number: _____

Assessor's Parcel Number: _____ Hot Tub: (Yes / No) Swimming Pool: (Yes / No)

House Living Area (Approximate Square Footage): _____ Number of Bedrooms: _____

Maximum Number of Overnight Occupants: _____ Number of On-Site Paved Parking Spaces: _____

DIAGRAM OR PHOTOGRAPH OF PARKING FACILITIES MUST BE INCLUDED

Website Address: _____

Management Company: _____

Contact Name: _____ Phone Number: _____

Property Maintenance Contact: _____ Phone Number: _____

REQUIRED FOR ALL PROPERTIES: Emergency 24-Hour Contact

Name: _____

24-Hour Contact Phone Number(s): _____

Address: _____

I certify that all information contained herein is accurate, to the best of my knowledge. I certify that I have read, understand, and will comply with the short-term rental regulations listed in the Town of Dutch John Planning and Zoning Ordinance, Chapter 8. I certify that all designated bedrooms meet all the local safety and building code requirements. I acknowledge that I will post the notice(s) required in the Town of Dutch John Planning and Zoning Ordinance, Chapter 8, Section 807 in this short-term home rental. I acknowledge that prior to using this property as a short-term home rental I must obtain all pertinent inspection approvals and pay all fees due. I acknowledge that the Town of Dutch John has the right to inspect this property. I will notify the Town of Dutch John changes to the permit, management mailing address or change of ownership. I understand I must keep my license current and that change of ownership in non-transferrable.

Signature of Property Owner: _____ Date: _____

Signature of Property Owner: _____ Date: _____

Signature of Property Owner: _____ Date: _____

EMERGENCY CONTACT RESPONSIBILITY

This is to inform you of your responsibility as the local contact for:

Property Owner(s): _____

Address of Rental Property: _____

Each owner of a short-term rental shall designate a responsible party who has access and authority to assume management of the unit and take remedial measures. The responsible party person shall be available 24 hours a day to respond to tenant and neighborhood questions or concerns within one (1) hour. An owner of a short term rental who resides in the Town of Dutch John may designate themselves as the responsible person. Any change in the local contact person’s address or telephone number shall be promptly furnished to the Town Clerk. Due to the language “assume management of the unit and take remedial measures”, you are responsible for contacting the renters when you have been notified of noise or parking complaints. You may be contacted by the Daggett County Sheriff’s Department or by neighbors to secure the property as needed. Therefore, your phone number will be available upon request to law enforcement staff, as well as to all the neighbors, and will be posted on the short-term rental home sign for the renter’s and law enforcement.

Local Contact Name: _____

Local Contact Address: _____

Phone Number(s): _____

Local Contact Signature: _____ Date: _____

ADDENDUM FOR SHORT-TERM RESIDENTIAL UNIT

Addendum #1: _____

Addendum #2: _____

Addendum #3: _____

Addendum #4: _____

Addendum #5: _____

Addendum #6: _____

