

Town of Dutch John



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for official use only

Date Received: _____ Fee: _____
Received By: _____ Receipt #: _____
Date Reviewed: _____ File No. _____
Information Complete ___YES ___NO

PLANNED UNIT DEVELOPMENT AMENDMENT APPLICATION

Name of Project/Development _____

Owner Name: _____ Owner Phone: _____

Physical Address: _____ Mailing Address: _____

City _____ State _____ Zip _____

Business Phone: _____ Mobile Phone: _____

Email: _____ Name of Corporation: _____

Representative Name: _____ Email: _____

Address: _____

City _____ ST _____ ZIP _____

Business Phone: _____ Mobile Phone: _____

PROPERTY LOCATION/DESCRIPTION

Mark/Lot: _____ Section: _____ Township/Bock: _____ Range/Addition: _____

Street Address: _____

Current Zoning: _____ Current Use: _____

SUMMARY OF PROPOSED AMENDMENT(S)

Along with this completed application please submit any drawings, proposed plats and any other relevant information to the Planning & Zoning Commission. It will be determined by the Planning & Zoning Commission if the amendment is a major or minor amendment. More information may be required. The proposed amendment may require a public hearing. Refer to the “Dutch John Planning and Zoning Ordinance” for more information.

I (We), the undersigned, understand that the filing fee accompanying this application is not refundable. I (We) further understand that the fee pays for the cost of processing, and the fee does not constitute a payment for approval of the application. I (We) further understand that public hearing notice requirements and associated costs for land development projects are my (our) responsibility. I (We) further understand that other fees may be applicable per Town Ordinances. I (We) also attest that the above information is true and correct to the best of my (our) knowledge.

Property Owner's Signature

Date

Representative's Signature

Date