LAND USE APPLICATION

Community Development Department

Town of Silverton

1360 Greene Street, Silverton CO, 81433

**Applicant:** Click to enter text. **Company:** Click to enter text.

**Mailing Address:** Click to enter text.

**Phone:** Click to enter text. **Email:** Click to enter text.

**Owner:** Click to enter text.

**Mailing Address:** Click to enter text.

**Phone:** Click to enter text. **Email:** Click to enter text.

**Property Location/Address:** Click to enter text.

**Assessor's parcel no.** Click to enter text. **Lot Size:** Click to enter text.

**Current Zoning:** Click to enter text. **Proposed Zoning:** Click to enter text.

**Current Use:** Click to enter text. **Proposed Zoning:** Click to enter text.

(The person listed as “Applicant” will be contacted to answer questions regarding this application, provide additional information when necessary, post public hearing signs, receive a copy of the staff report prior to Public Hearing, and shall be responsible for forwarding all verbal and written communication to the owner.)

**Type of action requested** (check one or more of the actions below which pertain to your request):

[ ] Annexation [ ] Site Development Plan approval

[ ] Change of zoning [ ] Subdivision

[ ] Vacation Rental [ ] Temporary Use, Building, Sign

[ ] Consolidation Plat [ ] Development in Hazard Zones

[ ] Historic/AROD Review [ ] Use Subject to Review

[ ] Lot Line Adjustment [ ] Variance/Waiver

[ ] Planned Unit Development [ ] Other: Click to enter text.

**Detailed Description of Request**: Click to enter text.

**CERTIFICATION**

As owner of the aforementioned property, I hereby consent to the submission of this application and authorize the applicant to act on my behalf with regard to this application.

I, Click to enter text., certify that the information and attachments submitted are true and correct to the best of my knowledge. In filing this application, I am acting with the knowledge and consent of the property owners.

**To be filled out by staff:**

|  |  |
| --- | --- |
| **DATE RECEIVED:** Click to enter text. | **RECEIVED BY:** Click to enter text. |
| **FEES PAID:** Click to enter text. | **CASE NO:** Click to enter text. |
| **QUARTER SECTION MAP:** Click to enter text. | **RELATED CASES:** Click to enter text. |
| **PRE-APP MEETING DATE:** Click to enter text. | **CASE MANAGER:** Click to enter text. |