CITY USE ONLY			
FILE NUMBER	FILE NAME		
DATE RECEIVED	BY FEE		
HEARING DATE	NOTIFICATION DEADLINE		

Conditional Use Permit Application

Applicant's Name				
Address	Telephone No			
Applicant's Representative (if appli	cable)			
Address	Telephone No			
Subject Property Legal Description	: Lot Block/Tract Survey Number			
Lot Size:	Subdivision Name			
Township:	Range:			
To help the planning commission ga complete the following:	ather facts about the proposed conditional use permit, please			
1. Describe in detail the conditiona	l use requested:			
There will be a total of four 2-	bedroom units and four 1-bedroom units; eight units total			
2. Please attached a plot plan s other relevant information.	howing lot lines, building locations, parking spaces, and			
3. What types of chemicals, proces	ses, machinery or equipment will be used:			

4. Approximately how many days per week and how many hours per day will the proposed use operate?

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5. What noise, odor, smoke, dust, or other pollutants could be caused by the proposal?

6. What types of uses are currently located within 300 feet of the exterior property boundaries?

7. What types and sizes of buildings, signs, storage and loading areas, screening, etc. are planned (size, height, type)? _____

8. What utilities are needed?

9. What roads will provide access?_____

10. What type and volume of traffic will be generated by the conditional use?_____

11. What are your parking needs and where will they be provided (indicate on the plot plan where parking is to be provided)?

12. Will the proposed conditional use be compatible with the neighborhood in general? Why?

The criteria by which a conditional use permit application is approved or denied is listed in Chapter 18.06.002.C-K of the Craig Land Development Code.

A decision of the planning commission my be appealed to the city council within 30 days of the mailing of the notice of the commission's decision. Decisions of the city council may be appealed to Superior Court.

I (we) being duly sworn, depose and say that the foregoing statements and answers herein contained, and the information herewith submitted, are in all respects true and correct to the best of my knowledge and beliefs.

Dated this	day of	, 20
Jacqueline	Pata	
Applicant		Applicant

Authorization for Agency

If the applicant listed on this application is other than the sole deed holder of the property or properties upon which the temporary use will take place, complete the following authorization to act as agent:

I (we), the undersigned, hereby certify that as deed holder(s) of record of the property or properties described above, I (we) hereby authorize the person listed as the applicant on this application to act and appeal as agent with respect to this application.

Dated this _	9	_ day of _	August		, 2022	•
Signature(s) of deed l	nolders: _	Cluita	E	Cook	