

LAND USE APPLICATION FORM

PROJECT NAME:		
DATE SUBMITTED:	APPLICATION FEE:	APPLICATION DEPOSIT:

TYPE OF APPLICATION:		
<input type="checkbox"/> Annexation, Zoning and Concept Plan <input type="checkbox"/> Use by Special Review-Major <input type="checkbox"/> Use by Special Review-Minor <input type="checkbox"/> Use by Special Review-Gravel <input type="checkbox"/> Use by Special Review-Oil & Gas <input type="checkbox"/> Major Subdivision <input type="checkbox"/> Minor Subdivision	<input type="checkbox"/> Final Plat <input type="checkbox"/> Preliminary Plat <input type="checkbox"/> Site Plan <input type="checkbox"/> Sketch Plan <input type="checkbox"/> Variance <input type="checkbox"/> Planned Unit Development <input type="checkbox"/> Change of Zone	<input type="checkbox"/> Second Driveway <input type="checkbox"/> Floodplain Development Permit <input type="checkbox"/> Vacation of Right of Way <input type="checkbox"/> Comprehensive Plan Amendment

BRIEF PROJECT DESCRIPTION:

PRE-APPLICATION CONFERENCE WITH:	DATE:
----------------------------------	-------

Applicant's Name:	Project Location:
Address:	Existing Use:
	Proposed Use:
Phone/Fax/E-mail:	Existing Zoning:

RELATION TO PROPERTY OWNER:

Total Acreage of Property under Consideration:	
Number of Existing Residential Lots:	Number of Proposed Residential Lots:
Number of Existing Commercial Lots:	Number of Proposed Commercial Lots:
Number of Existing Industrial Lots:	Number of Proposed Industrial Lots:

ADDITIONAL CONTACTS	
Property Owner:	Consultant:
Address:	Address:
City/State/Zip:	City/State/Zip:
Phone/Fax/E-mail:	Phone/Fax:
Property Owner:	Consultant:
Address:	Address:
City/State/Zip:	City/State/Zip:
Phone/Fax/E-mail:	Phone/Fax/E-mail:

LAND USE APPLICATION FORM (CONTINUED)

COMPREHENSIVE PLAN MAP DESIGNATIONS:

LAND USE & PUBLIC FACILITIES

Land Use Designations:
Public Facilities:

IMAGE AND DESIGN

Gateway: Yes No
Important Connection: Yes No

TRANSPORTATION

Street Connections:

UTILITY AND SPECIAL DISTRICTS

Water:
Sewer:
Fire Protection:
Other:

PARKS, OPEN SPACE AND RECREATION

Proposed park and/or trail:

ENVIRONMENTAL ISSUES

Property in floodplain: Yes No
Sensitive wildlife habitat area: Yes No
Soil Type:

OIL AND GAS

Oil and/or gas wells: Yes No

CERTIFICATION

I certify that I am the lawful owner of the parcel(s) of land, which this application concerns, and consent to this action.

Owner: _____ Date: _____

I certify that the information and exhibits I have 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. I understand that all materials and fees required by the Town of Milliken must be submitted prior to having this application processed.

Applicant: _____ Date: _____

STAFF USE ONLY

APPLICATION ACCEPTED:

Date: _____

By: _____

Fee: _____

Fee: _____