



Staff Use Only
Application Number: _____
Received By: _____
Date: _____

Idaho Springs Land Use

Application

1. This is the master land use form for the City of Idaho Springs. Please use to apply for:
(Please select one of the following as appropriate)

- | | | |
|------------------------------|--------------------|------------------------|
| Administrative (Subdivision) | Annexation | Conditional Use Waiver |
| Plat Major Subdivision | Variance or Appeal | RV Park |
| Planned Development Overlay | Minor Subdivision | Site Plan |
| Sign Permit | Rezoning | |
| Temporary Use | Other: _____ | |

2. Project Name: _____
Please print or type legibly

3. Contact information: (a list of additional contacts may be attached)

Owner Name: _____	Applicant Name: _____
Address: _____	Address: _____
Telephone: _____ Fax: _____	Telephone: _____ Fax: _____
E-mail: _____	E-mail: _____

4. Property Description:

Address or Location: _____
Existing Zoning: _____ Existing Use: _____
Proposed Zoning: _____ Proposed Use: _____

5. Purpose: (describe intent of this application in 1-2 sentences)

6. Certification: (must be signed in blue ink)

I certify that I am the lawful owner of the parcel(s) of land affected by this application and hereby consent to this action.

Owner: _____ **Date:** _____ **AND**

I certify that the information and attachments 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 owner(s). I understand that all materials and fees required by the City of Idaho Springs must be submitted prior to processing this application.

Applicant: _____ **Date:** _____