



Plat Amendment Application

Permit Number _____ Date _____

Name of Subdivision _____

General Location of Property _____

Legal Location of Property _____

Current Zoning of Property _____

Total Land Area of Property _____

Name of Applicant or Owner's Representative _____

- Applicant is other than owner
 - If applicant is other than the owner, a notarized authorization statement with with current address must accompany this application.

Mailing Address _____

Phone _____ Fax _____ Cell _____

Signature _____

Name of Owner of Property _____

Property Owners Consent: By signature hereon, the property owner acknowledges that City officials and/or employees may in the performance of their functions, enter upon the property to inspect, post legal notices, and/or other standard activities in the course of processing this application, pursuant to Idaho Code §67-6507. The property owner is also hereby notified that members of the Planning and Zoning Commission and City Council are required to generally disclose the content of any ex parte discussion (outside the hearing) with any person, including the property owner or representative, regarding this application.

Property Owner Signature _____ Date _____

Office Use Only

Reviewed With Applicant by _____ **Date** _____
Signature

Planning and Zoning Administrator _____

Notes by P&Z _____

Reviewed by Public Works _____ **Date** _____

Review City Engineer _____ **Date** _____

Reviewed By P&Z Chair _____ **Date** _____

Review by Fire Marshall _____ **Date** _____

Review City Council _____ **Date** _____

Permit Approved: YES ___ **NO** ___ **CONDITIONS YES** ___ **NO** ___

Notes by City Council _____

Follow Up Inspections _____ **Date** _____