



City of Victor, Idaho

Pre-Application Conference

Permit #: PAC _____

Date Received: _____

IWORQ #: _____

Unit 101, 10 South Main St. | PO Box 122 Victor, ID 83455 | Ph: 208-787-2940 | Fax: 208-787-2357 | www.victorcityidaho.com

All information transmitted in a Pre-Application Conference is non-binding and will be re-evaluated upon submittal of a complete application.

OWNER: _____ **PHONE:** _____

***APPLICANT:** _____ **PHONE:** _____

* If the applicant is someone other than the owner, a notarized statement authorizing applicant to act as an agent for the owner must accompany this application.

APPLICANT MAILING ADDRESS: _____

APPLICANT EMAIL ADDRESS: _____

BUILDING ADDRESS: _____

SUBDIVISION: _____ **BLOCK:** _____ **LOT:** _____

APPLICATION SUBMITTAL REQUIREMENTS

See check list below for details

- WARRANTY DEED**
- SITE PLAN & NARRATIVE** (*Hard Copy & Digital Copy*)
- NOTARIZED AUTHORIZATION LETTER FROM PROPERTY OWNER** (*If applicable*)

PROJECT PROPOSAL

Check all that apply.

- | | |
|---|--|
| <input type="checkbox"/> BUILDING PERMIT RESIDENTIAL | <input type="checkbox"/> REZONE MAP AMENDMENT |
| <input type="checkbox"/> BUILDING PERMIT COMMERCIAL | <input type="checkbox"/> ANNEXATION |
| <input type="checkbox"/> SUBDIVISION | <input type="checkbox"/> CONDITIONAL USE PERMIT |
| <input type="checkbox"/> PLAT AMENDMENT | <input type="checkbox"/> ZONING CODE TEXT AMENDMENT |
| <input type="checkbox"/> LOT SPLIT | <input type="checkbox"/> COMPREHENSIVE PLAN AMENDMENT |
| <input type="checkbox"/> LOT LINE ADJUSTMENT | <input type="checkbox"/> VARIANCE |
| <input type="checkbox"/> DEVELOPMENT AGREEMENT AMENDMENT | <input type="checkbox"/> OTHER: _____ |

PRE-APPLICATION CONFERENCE AVAILABILITY

Planning, Engineering and Public Works staff reserve times on Monday and Wednesday of each week for Pre-Application Conferences. Please indicate the times/days you are able to meet. Circle all that apply.

WEEK OF: _____ **MON: 10:30-11:30; 11:30-12:30; WED: 10:30-11:30; 11:30-12:30**

WEEK OF: _____ **MON: 10:30-11:30; 11:30-12:30; WED: 10:30-11:30; 11:30-12:30**

I, _____, the applicant, understand that during the Pre-Application Conference I must present a narrative outlining the scope and scale of the proposed development, and a site plan that generally shows the property, existing development, and proposed development.

Under penalty of law I hereby certify that I have read and understand this application and state that the information herein is correct. I further acknowledge that any misrepresentation of the information contained in this application are grounds for rejection of the application or revocation of a decision rendered on the information contained herein.

APPLICANT'S SIGNATURE: _____ **DATE:** _____

OFFICE USE ONLY

FEE

\$1,500.00 - RETAINER

This fee is due for any staff consultation anticipated beyond 2 hours. The retained amount will be reduced at the fully burdened rate of each staff member consulted. Any amount remaining when the application closes will be refunded.

RECEIPT #: _____ DATE RECEIVED: _____ RECEIVED BY: _____