

PARK CITY MUNICIPAL CORPORATION
PLANNING DEPARTMENT
445 MARSAC AVE | PO BOX 1480
PARK CITY, UT 84060
(435) 615-5060



MODIFICATION TO A MASTER PLANNED DEVELOPMENT

For Office Use Only

PLANNING COMMISSION

PROJECT PLANNER

APPLICATION #

APPROVED

DATE RECEIVED

DENIED

EXPIRATION

PROJECT INFORMATION

NAME:

ADDRESS:

TAX ID:

OR

SUBDIVISION:

OR

SURVEY:

LOT #:

BLOCK #:

APPLICANT INFORMATION

NAME:

MAILING

ADDRESS:

PHONE #:

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FAX #:

() -

EMAIL:

APPLICANT REPRESENTATIVE INFORMATION

NAME:

PHONE #:

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EMAIL:

If you have questions regarding the requirements on this application or process please contact a member of the Park City Planning Staff at (435) 615-5060 or visit us online at www.parkcity.gov.

SUBMITTAL REQUIREMENTS – All of the following items must be included for the Planning Department to take the application.

1. Completed and signed application form.
 2. Current Title Report – with an issue date no later than 30 days from the application submittal date.
 3. Written statement describing the request for a minor or substantive modification outlined in Land Management Code § 15-6-4(K), a preliminary site plan of the proposal, and any other information pertaining to the conversion of the proposed project.
 4. Copies of previous agreements between the City and the property owners or between the property owners and a third party.
 5. Review fees: \$100.00 per unit equivalent
 6. An electronic Excel spreadsheet with property owner, Summit County Assessor Parcel Number, and mailing address for properties within 300 feet, measured from the property line.
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PROJECT DESCRIPTION

2. On a separate sheet of paper, give a general description of the proposal and attach it to the application (See Submittal Requirement #2).
3. Existing Zoning: _____
4. Is the project within the Sensitive Lands Overlay?
Yes _____ No _____
5. Current use of the property: _____
6. Total Project Area: _____ acres _____ square feet
7. Number and unit equivalents: _____ allowed _____ proposed
8. Number and configuration of residential units:
_____ existing _____ proposed
9. Commercial area:
_____ Gross floor area _____ Net leasable area
10. Type(s) of business activity: _____
11. Number of parking spaces:
_____ required _____ proposed
12. Project access via: (check one)
Public Road _____ Private Road _____ Private Driveway _____
13. Occupancy type: (check one)
Owner Occupied _____ Lease _____ Nightly Rental _____
14. Water service availability:
Existing _____ Requires extension of City service _____
15. Are there any previous agreements between the City and property owners or between the property owners and a third party?
Yes _____ No _____
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ACKNOWLEDGEMENT OF RESPONSIBILITY

This is to certify that I am making an application for the described action by the City and that I am responsible for complying with all City requirements with regard to this request. This application should be processed in my name and I am a party whom the City should contact regarding any matter pertaining to this application.

I have read and understood the instructions supplied by Park City for processing this application. The documents and/or information I have submitted are true and correct to the best of my knowledge. I understand that my application is not deemed complete until a Project Planner has reviewed the application and has notified me that it has been deemed complete.

I will keep myself informed of the deadlines for submission of material and the progress of this application. I understand that a staff report will be made available for my review three days prior to any public hearings or public meetings. This report will be on file and available at the Planning Department in the Marsac Building.

I further understand that additional fees may be charged for the City's review of the proposal. Any additional analysis required would be processed through the City's consultants with an estimate of time/expense provided prior to an authorization with the study.

Signature of Applicant: _____

Name of Applicant: _____

PRINTED

Mailing Address: _____

Phone: _____ Fax: _____

Email: _____

Type of Application: _____

AFFIRMATION OF SUFFICIENT INTEREST

I hereby affirm that I am the fee title owner of the below described property or that I have written authorization from the owner to pursue the described action. I further affirm that I am aware of the City policy that no application will be accepted nor work performed for properties that are tax delinquent.

Name of Owner: _____

PRINTED

Mailing Address: _____

Street Address/ Legal Description of Subject Property: _____

Signature: _____ Date: _____

1. If you are not the fee owner attach a copy of your authorization to pursue this action provided by the fee owner.
2. If a corporation is fee titleholder, attach copy of the resolution of the Board of Directors authorizing the action.
3. If a joint venture or partnership is the fee owner, attach a copy of agreement authorizing this action on behalf of the joint venture or partnership
4. If a Home Owner's Association is the applicant then the representative/president must attaché a notarized letter stating they have notified the owners of the proposed application. A vote should be taken prior to the submittal and a statement of the outcome provided to the City along with the statement that the vote meets the requirements set forth in the CCRs.

Please note that this affirmation is not submitted in lieu of sufficient title evidence. You will be required to submit a title opinion, certificate of title, or title insurance policy showing your interest in the property prior to Final Action.

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