



## EASTERN SUMMIT COUNTY

### CHECKLIST AND REVIEW PROCEDURE FOR REZONE APPLICATION

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- **CRITERIA FOR APPROVAL**

1. The amendment complies with the goals of the General Plan;
2. The amendment is compatible with adjacent land uses and will not be overly burdensome on the local community;
3. The specific development plan is in compliance with all applicable standards and criteria for approval as described in Chapter 4 of the Development Code;
4. The amendment does not adversely affect the public health, safety and general welfare.

- **SUBMISSION REQUIREMENTS**

- *Application form:* Completed and signed by the property owner(s).
- *Approval of the property owner(s) if different from the applicant:* The property owner(s) must sign the back of the application form, or submit a letter indicating their ownership and authorization for the submittal of the application.
- *Fee:* \$2,000.00
- *Applicable development permit and associated fees:* An application for a rezone will only be considered when accompanied by an applicable development proposal (i.e. Conditional Use Permit, Low Impact Permit).
- *Written description outlining the reason(s) for the proposed rezone request and accompanying development proposal.*
- ***ADDITIONAL INFORMATION MAY BE REQUIRED.***

- **REVIEW PROCEDURE**

1. The planner will review the application and determine if the application complies with the "Criteria for Approval" of a Rezone application.
2. The planner will schedule a public hearing before the Planning Commission which includes noticing all property owners located within 1,000' of the subject parcel.
3. After conducting a public hearing, the Planning Commission will make a recommendation to the County Council for approval, approval with conditions, or denial of the request.
4. The planner will schedule a public hearing before the County Council which includes noticing all property owners within 1,000' of the subject parcel.
5. After conducting a public hearing, the County Council will approve, approve with conditions, or deny the request.



Community Development Department  
P.O. Box 128  
60 North Main Street  
Coalville, Utah 84017  
Phone: 435-615-3124  
Fax: 435-615-3046  
www.summitcounty.org

## REZONE APPLICATION FORM

### Owner(s) of Record:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Fax: \_\_\_\_\_

### Authorized Representative to Whom All Correspondence is to be Sent:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Fax: \_\_\_\_\_

### Project Information:

Parcel #: \_\_\_\_\_ Subdivision Name: \_\_\_\_\_

Address: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_

Do you currently have constructions plans turned in for Building Permit review? YES (plan check #) \_\_\_\_\_ NO

### Project Description (acreage, building square footage, number of lots, etc.):

\_\_\_\_\_  
\_\_\_\_\_

### FOR OFFICE USE ONLY

\$2,000.00

*Snyderville Basin*

*Eastern Summit County*

RECEIPT #: \_\_\_\_\_ DATE RECEIVED: \_\_\_\_\_ RECEIVED BY: \_\_\_\_\_

**OWNER(S) ACKNOWLEDGEMENT**

All application fees must be paid at time of application submittal. No application will be processed until all application fees are paid. Notification and publication fees for required public hearing notices (individual notices mailed to property owners - \$2.00 per notice; 14 day publication of legal notice in local newspaper - cost of notice) will be billed to applicant at the time a hearing is scheduled. Notification fees must be paid within 10 days of billing.

**PLEASE NOTE REGARDING FEES**; the payment of fees and /or the acceptance of such fees by County Staff does not constitute any sort of approvals, vesting, or signify that the application is complete or appropriate in any manner. The collection of fees is simply a requirement to begin the review process that will ultimately make such determinations.

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I hereby declare under penalty of perjury that this application form, and all information submitted as part of this application form is true, complete, and accurate to the best of my knowledge. Should any information or representation submitted in connection with this application form be incorrect or untrue, I understand that Summit County may rescind any approval or sufficiency determination, or take other appropriate action.

Owner(s) Signature: \_\_\_\_\_ Date: \_\_\_\_\_