ADMINISTRATIVE CONDITIONAL USE PERMIT PROCEDURE

Certain uses which may be harmonious under special conditions and in specific locations within a zoning district, but improper under general conditions are classified as *Conditional Uses* and require a Conditional Use Permit from Midvale City. An Administrative Conditional Use Permit is issued for uses listed as Administrative Conditional Uses in the Midvale City Zoning Ordinance.

Applications for administrative conditional use permits shall be accompanied by all applicable maps, drawings, statements or documents as required by the Midvale City Planning Department.

**ITEMS TO BE SUBMITTED:** All required documents must be submitted with the application. Incomplete applications will not be accepted.

- Fee and application.
- Property owner’s affidavit and agent authorization.
- Site plan, including the following:
  - Accurate dimensions of subject property drawn to scale with north arrow;
  - Location of existing and proposed buildings, parking areas, landscape areas, sidewalk, curb and gutter, etc;
  - Location of existing property features such as streets, canals, hillsides, etc;
  - Submit one reduced copy, 11” x 17” of the site plan; and
  - If a new building or exterior remodel, please submit all building elevations.

**PROCEDURE:**

- Meet with Midvale City Planning Staff to review proposed Conditional Use Permit.
- Submit all required documents.
- Adjacent property owners will be notified, and public comment will be received.
- Upon review of the application, the Community Development Department (CDD) may approve, deny or approve with conditions the conditional use request. In authorizing any conditional use request, the CDD shall impose such requirements and conditions as necessary to protect adjacent properties and the public welfare. The CDD will not authorize a Conditional Use Permit unless the evidence presented is such to establish the following:
  - That all conditional use criteria listed in the code have been satisfied;
  - That the use will not be detrimental to the health, safety and general welfare of persons residing or working in the vicinity, or injurious to property or improvements in the vicinity; and
  - That the proposed use will comply with all regulations specified in the Midvale City Municipal Code regarding such use.
- The CDD will itemize, describe and justify any conditions that may be placed on the Conditional Use Permit.
- Following the issuance of an Administrative Conditional Use Permit, Midvale City will periodically inspect the business or development to ensure that the applicant is in compliance with the conditions and requirements of the Administrative Conditional Use Permit.

**MISCELLANEOUS INFORMATION:**

- All Conditional Use Permits shall run with the land.
- If there is no substantial action under a Conditional Use Permit within a maximum period of one (1) year, the permit shall expire.

❖ A public hearing is not required for an Administrative Conditional Use Permit request; however, a public hearing may be requested if the Planning and Zoning Commission or the Midvale City Planner deems it necessary in the public’s interest, or if so petitioned by affected property owners.
ADMINISTRATIVE CONDITIONAL USE PERMIT APPLICATION

Applicant Information

Name: ____________________________________________

Business Name {if applicable}: ____________________________

Mailing Address: _______________________________________

City, State, Zip: ________________________________________

Daytime Phone: ______________________________ Email: __________

Property Owner Information

Owner Name {if different}: ________________________________

Agent Name {if applicable}: ______________________________

Mailing Address: _______________________________________

City, State, Zip: ________________________________________

Daytime Phone: ______________________________ Email: __________

Project Information

Property Address: ________________________________________ Sidwell No.: _________________________

Detailed Nature of Use {business statement, hours, number of employees, activities, related products, etc}:

{May be attached}

Application Fees

$75 Apiaries & Chickens $250 without site plan review $890 with preliminary site plan review {if applicable}

Plus postage cost

Authorized Signature

I certify the submitted information on and included with this application is true and correct to the best of my knowledge, and, if found otherwise, this application and any associated approvals shall be revoked. I am aware this application does not authorize any development activity or conducting of business until the required permit is approved and issued by Midvale City. I also understand when a permit is granted subject to conditions, such permit does not become effective until all conditions have been satisfied. I authorize City Staff to enter the property for purposes related to development review and inspections. I am aware that only complete applications will be accepted for processing (complete application requirements are attached).

Authorized Signature: _______________________________ Date: _________________

Note: Obtaining an administrative conditional use permit does not eliminate the necessity of obtaining a building permit and/or a business license {if applicable}. Please contact the Midvale City Building Department or Business License Administrator.
OWNER’S AFFIDAVIT

I, (We) _____________________________________________________________________________________________ hereby declare under the penalty of perjury that I (we) am (are) the owner(s) of the property involved in this request, or if the owner is a corporation or other entity, that I (we) am (are) duly authorized to execute this affidavit on behalf of said corporations or entity. I (we) further declare that the foregoing statements and the information submitted herewith are true and correct.

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<thead>
<tr>
<th>PROPERTY OWNER’S INFORMATION</th>
<th>CAPACITY CLAIMED BY SIGNER</th>
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<tr>
<td>____________________________</td>
<td>⊗  INDIVIDUAL(S)</td>
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<td>____________________________</td>
<td>⊗  PARTNER(S)</td>
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SIGNER IS REPRESENTING: ________________________________________________________________
NAME OF PERSON(S) OR ENTITY(IES)

AGENT/TENANT AUTHORIZATION (if applicable)

I (we) hereby authorize ________________________________________________________________ (Applicant’s Name) to apply for ________________________________ (application type: CUP, ACUP, MPD, etc.) requesting ________________________________________________________________ (Type of activity)

___________________________________________ (Property Owner)

___________________________________________ (Property Owner)

Dated this ___ day of ______________, ____, personally appear before me __________________________, the signer(s) of the above affidavit who duly acknowledged to me that they executed the same.

___________________________________________ (Notary)
Residing in ________________________________
My commission expires: __________________________