



Franklin County

Planning and Building Department

Jerrod B. MacPherson—Director

FRANKLIN COUNTY PLANNING DEPARTMENT

AMENDMENT AND REZONE APPLICATION REQUIREMENTS (MAP AND TEXT)

- Land Development Application.
- \$800.00 Amendment and Rezoning Fee – Checks made payable to the Franklin County Planning Department.
- \$80.00 Certificate of Ownership and Variance Report Fee: **Check made payable to the Franklin County Assessor's Office.** *An applicant **does not** need to contact the Assessor's Office to obtain this report.* At the time of application, the Planning Division will request the report from the Assessor's Office. The report includes the Title Information (title certificate) and the Adjoining Property Owners Names and Addresses (500 feet within an Urban Growth Area or one (1) mile outside an Urban Growth Boundary). As an alternative to the Assessor's Office, an applicant may also obtain this report from a licensed title company.
- Answer the questions identified in Chapter 43.3.0 of County Development Regulations.

- * All amendment and rezoning applications require that proper notice be given (surrounding property owners and newspaper) and one (1) open record public hearing be held before the Franklin County Planning Commissioners with final review by the Board of Commissioners.

Franklin County

Planning and Building Department

Jerrold B. MacPherson—Director

APPLICATION FOR URBAN AREA BOUNDARY OR MAP AMENDMENT TO FRANKLIN COUNTY COMPREHENSIVE PLAN

An Urban Growth Area (UGA) Boundary or Map Amendment is a proposed change to the Urban Growth Area Boundary, or Comprehensive Plan of Franklin County.

Complete all the blanks in this application form. We will not accept a letter or report in lieu of this application. However, reports, photos or other materials may be submitted to support your application.

Applicant: _____

Contact (if different than applicant): _____

Address: _____

City/State/Zip Code: _____

Phone: (____) _____

DESCRIPTION OF AMENDMENT:

Attach a map of the proposed map amendment, showing all parcels and parcel numbers (see the County Assessor's Office to obtain maps and parcel information). Provide names, mailing addresses, and mailing labels for all property owners within 500 ft.(if inside the UGAB) or 1 mile (outside the UGAB) of the proposed amendment area.

Area of Amendment:

Quarter _____ Section: _____ Township: _____ Range _____

Total number of Parcels: _____

The total number of parcels and total acreage must be consistent with County Assessor data.

Total acreage: _____

Estimated existing population within area: _____

Current Zoning and Comprehensive Plan Land Use Designation: _____

Desired Comprehensive Plan Land Use Designation(*i.e.*; Industrial; Commercial; Residential etc) _____

1. General Description of Proposal: _____

2. Why is the UGA or Map Amendment needed and being proposed? _____

3. Describe the land uses surrounding the proposed amendment area (residential, commercial, agriculture, etc): _____

NORTH: _____

SOUTH: _____

EAST: _____

WEST: _____

4. Has the proposed UGA or Map Amendment been addressed in approved environmental documentation (e.g., Environmental Impact Statement or Determination of Non-Significance) as required by SEPA? (please cite title, date, and appropriate sections): _____

Note: If sufficient Environmental Documents have not been completed, the proponent will be required to provide or pay for the preparation of such documents (Environmental Checklist or EIS).

5. Identify the providers and the plans or studies which demonstrate the availability of capital improvements to serve the proposed area.

Sanitary Sewers: _____

Domestic Water: _____

Transportation: _____

6. Provide the proposed range of allowable residential densities and projected population at full build-out within the proposed UGA or Map Amendment area: _____

7. **Signature of Applicant:**

I certify that the information contained in this application is true and correct to the best of my knowledge.

Signature

Date

Franklin County

Planning and Building Department

Jerrold B. MacPherson—Director

PLANNING DIVISION LAND DEVELOPMENT APPLICATION

Application Number: _____

Applicant/Representative:

Existing Land Use Zoning District(s):

Name: _____

Address: _____

Legal Description of Property: _____

Phone: (____) _____

Cellular(____) _____

Fax: (____) _____

Site Address: _____

Owner(s): (attach additional sheet if necessary)

Total Acreage Involved: _____

Name: _____

Source of Water: _____

Address: _____

Source of Irrigation: _____

Sewage Disposal System: _____

Phone: (____) _____

Source of Power: _____

Cellular: (____) _____

Comprehensive Plan: _____

Fax: (____) _____

Description of Improvements on Property: _____

Existing Use of Site/Property: _____

Proposed Development Application Request (Specify; Short Plat, Cond Use, Zone Change, Home Occupation, etc.)

We, the undersigned, hereby authorize the filing of this application and certify that the information contained in this application is complete and correct to the best of our knowledge. This authorizes the designated Applicant's representative (if applicable) to act on behalf of the applicant for the processing of this request.

() Owner _____ Date _____

() Applicant/Representative _____ Date _____

Print Name: _____

Print Name: _____