



# Land Use Change Permit Application

(Please Print or Type Information)

Administrative Land Use Permit _____	Minor Land Use Permit _____	Major Land Use Permit _____
Date of Application _____	Application # _____	Permit # _____
Location: Section _____	Township _____	Range _____
Fee _____	Office use only	

Is the applicant the owner of the land? YES \_\_\_\_\_ NO \_\_\_\_\_

- If NO, please attach letter signed by owner(s)
- For corporate ownership, attach evidence of registration or incorporation in Colorado.

Total acres of land involved in the project: \_\_\_\_\_ Legal Description \_\_\_\_\_  
 Name and Address of applicant: \_\_\_\_\_  
 (Township, Range, Section, Quarter)

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

Phone Numbers: Home \_\_\_\_\_  
 Work \_\_\_\_\_  
 Cell \_\_\_\_\_

- **Include a Vicinity Map (8 ½ x 11)**
- **Include a Survey Map and/or Site Plan and elevation drawing of structures.**

**Description of the proposed land use change.** (The written description shall include the total number of acres of the property where the change will occur. See the Application Submittal Requirements in the "Phillips County Land Use Code." Include a description of how the proposed change satisfies the standards in Article 4. Additional pages may be added.)

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

Wastewater System: \_\_\_\_\_

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

Water Supply System: \_\_\_\_\_

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

Impact Analysis based on standards and criteria of Article 4: \_\_\_\_\_

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Drainage and Erosion Control Plan: \_\_\_\_\_

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Noxious Weed Control Plan: \_\_\_\_\_

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Pertinent information relevant to the land use change you are proposing: \_\_\_\_\_

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Additional pages may be attached.

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Date

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Name Printed (Applicant)

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Signature

# Land Use Change Permit Application

(Minor/Major Land Use Changes Only)

Recommendation of the Planning Commission (Major Land Use Change Only):

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Signature \_\_\_\_\_  
(Chair)

Date \_\_\_\_\_

Public Hearing Held \_\_\_\_\_  
(Date)

Board of County Commissioners took the following action:

Approval \_\_\_\_\_

Denial \_\_\_\_\_

Conditional Approval

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Signature \_\_\_\_\_  
(Chair)

Date \_\_\_\_\_