



Community Development Department  
 231 N. 7<sup>th</sup> Street, Silt, CO 81652  
 (970) 876-2353 (office) (970) 876-2937 (fax)  
 www.TownOfSilt.org

## Land Use Application Form

<input type="checkbox"/> Amended Plat	<input type="checkbox"/> Boundary Adjustment	<input type="checkbox"/> Subdivision Exemption
<input type="checkbox"/> Annexation	<input type="checkbox"/> Sketch Plan	<input type="checkbox"/> Floodplain Development
<input type="checkbox"/> Final Plan	<input type="checkbox"/> Planned Unit Development	<input type="checkbox"/> Vacation of Right-of-Way
<input type="checkbox"/> Text Amendment	<input type="checkbox"/> Site Plan Review	<input type="checkbox"/> Metro District or Special District
<input type="checkbox"/> Easement Agreement	<input type="checkbox"/> Zoning or Rezoning	<input type="checkbox"/> Subdivision Improvement Agreement
<input type="checkbox"/> Preliminary Plan	<input type="checkbox"/> Special Use Permit	<input type="checkbox"/> ADA or ADA Amendment
<input type="checkbox"/> Zoning Variance	<input type="checkbox"/> Intergovernmental Agreement	<input type="checkbox"/> Other: _____

**Project Name:** \_\_\_\_\_ **Project Description:** \_\_\_\_\_

**Owner's Name:** \_\_\_\_\_ **Owner's Number:** \_\_\_\_\_ **Owner's Email Address:** \_\_\_\_\_

Address: \_\_\_\_\_ Parcel ID Number: \_\_\_\_\_

Legal Description (*attach additional sheets if necessary*): \_\_\_\_\_

\_\_\_\_\_

Access to Property: \_\_\_\_\_

Acreage or Square Footage: \_\_\_\_\_ Existing Land Use Designation: \_\_\_\_\_

Proposed Land Use Designation: \_\_\_\_\_

Existing Zoning: \_\_\_\_\_ Proposed Zoning: \_\_\_\_\_

Proposed Use / Intensity of Use: \_\_\_\_\_

- Submittal Requirements:**
- A completed original application with original signatures and two copies (2 full sets) shall be submitted to the department for review. The application shall include two sets of 24" x 36" plans, plats and other appropriate drawings. Full application must also be submitted in electronic format.
  - In addition to this application, all information on the supplemental checklist must be submitted.
  - Incomplete applications will not be accepted and will delay processing.
  - When the documents are deemed adequate, additional copies as required by the department shall be submitted no less than ten (10) days before the public hearing.
  - All documents submitted for Land Use Applications shall be collated and paper-clipped (no staples). All plans, plats or drawings shall be organized and submitted ready for review, to avoid delays in processing. Fees and Deposits are collected at the time of submittal.

**STAFF USE ONLY**

Pre-app conference: \_\_\_\_\_ (date) Fees: \_\_\_\_\_

Application Received: \_\_\_\_\_ (date) Deposits: \_\_\_\_\_

PZC approval: \_\_\_\_\_ (date) Date Fees Collected: \_\_\_\_\_

BOT approval: \_\_\_\_\_ (date)

# Billable Party Agreement

Property Owner(s): Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Company: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Authorized Rep.: Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Company: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Billable Party: Owner \_\_\_\_\_ Representative \_\_\_\_\_

The Billable Party, by signing below, hereby agrees to reimburse the Town the actual costs to the Town plus 15% administrative fees for all billable staff time and contract services, including, but not limited to, planning, reviewing, inspecting, engineering, surveying and legal services rendered in connection with the applicant's request. A deposit will be required if deemed necessary by Town Staff. The Billable Party shall also reimburse the Town for the cost of making any corrections or additions to the master copy of the official Town map and for any fees for recording any plats and accompanying documents with the County Clerk and Recorder of Garfield County. The Billable Party agrees that interest shall be imposed at a rate of 5% per month on all balances not paid within thirty (30) days of the date of the statement. In addition to any and all remedies available to the Town and in the event the Town is forced to pursue collection of any amounts due and unpaid, the Town shall be entitled to collect attorney's fees and costs incurred in said collection efforts in addition to the amount due and unpaid.

Name (printed): \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Type of Identification: \_\_\_\_\_ Identification Number & Expiration: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

County of \_\_\_\_\_)

§

State of \_\_\_\_\_)

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
(Day) (Month) (Year)

By \_\_\_\_\_ Witness my hand and official seal \_\_\_\_\_  
(Notary Name) (Notary Signature)

(seal)

Notary Public  
My Commission Expires \_\_\_\_\_

**Disclosure of Property Ownership**

- \_\_\_\_\_ If owner is an individual, indicate name exactly as it appears on the deed.
- \_\_\_\_\_ If owner is a corporation, partnership, limited partnership or other business entity, name principals on a separate page. Please include articles of organization, partnership agreement, etc., as applicable.
- \_\_\_\_\_ If owner is a land trust, name beneficiaries on a separate page.
- \_\_\_\_\_ If applicant is a lessee, indicate the owner(s) on a separate page.
- \_\_\_\_\_ If applicant is a contract purchaser, attach a copy of the contract and indicate the owner(s) on a separate page.

*Please provide the name(s), mailing address(es), street address(es) and phone number(s) for all owners.*

**Property Owner Affidavit**

I/We, \_\_\_\_\_, being first duly sworn, depose and state under penalties of perjury that I am (we are) the owner(s) of the property described herein and which is the subject of the application and proposed hearings; that all answers provided to the questions in this application, and all sketches, data and all other supplementary matter attached hereto and made part of this application are honest and true to the best of my (our) knowledge and belief. I (we) understand that this application must be complete and accurate prior to a hearing being scheduled. I (we) authorize Town staff to visit the site as necessary for proper review of this application.

(If there are special conditions such as guard dogs, locked gates, restricted hours, etc., please give the name and phone number of the person(s) who can provide access to the site)

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Type of Identification

County of \_\_\_\_\_ )

ss.

State of \_\_\_\_\_ )

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
(fill in day) (fill in month) (fill in year)

By \_\_\_\_\_  
(name printed)

Witness my hand and official seal.

(seal)

Notary Public

My Commission expires: \_\_\_\_\_

**Authorized Representative**

I/We further permit \_\_\_\_\_ to act as my/our representative in any manner regarding this application, to answer any questions and to represent me/us at any meeting(s) and public hearing(s) which may be held on this application.

NOTE: All correspondence will be sent to the authorized representative. It will be the representative's responsibility to keep the owner(s) adequately informed as to the status of the application.

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Type of Identification

County of \_\_\_\_\_ )

\_\_\_\_\_ )

State of \_\_\_\_\_ )

ss.

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
(fill in day) (fill in month) (fill in year)

By \_\_\_\_\_  
(name printed)

Witness my hand and official seal.

\_\_\_\_\_  
Notary Public

My Commission expires: \_\_\_\_\_

# Public Notice Requirements

The Silt Municipal Code, Chapter 16.16 requires Public Notices for Land Use Application to be submitted to the newspaper and sent by certified, including return receipt mail, to property owners within 200 feet (not including rights-of-way, rivers, tributaries, or public parcels).

The Town will provide the Public Notice that the applicant will need to mail out. The Town will send the Public Notice to the newspaper. Once mailed, the applicant will need to provide the Town with the *original* certified mailing receipts and the return receipt mailings (green cards) need to be addressed to:

Town of Silt  
 Attn: Community Development  
 P.O. Box 70  
 Silt, CO 81652

**\*Please note that the list of property owners within 200 need to be submitted at the time that the Land Use Application is submitted and all original documents need to be provided to the Town\***

The minimum public notice requirements are as follows:

Type of Land Use Application	P & Z Recommendation	P & Z Decision	1 <sup>st</sup> Resolution	2 <sup>nd</sup> Resolution	1 <sup>st</sup> Reading Ordinance	2 <sup>nd</sup> Reading Ordinance
Annexation	15 days	N/A	15 days	4 consecutive weekly	15 days	None (if continued)
Zoning/Rezoning	15 days	N/A	N/A	N/A	15 days	None (if continued)
Major Subdivision						
Sketch	N/A	N/A	15 days	N/A	N/A	N/A
Preliminary	15 days	N/A	15 days	N/A	N/A	N/A
Final	10 days	N/A	10 days	N/A	N/A	N/A
Minor Subdivision						
Sketch	10 days	N/A	N/A	N/A	N/A	N/A
Final	N/A	N/A	10 days	N/A	N/A	N/A
Planned Unit Development (See above for Major Subdivision)	See above	See above	See above	See above	See above	See above
Special Use Permit	N/A	15 days	15 days	N/A	N/A	N/A
Variance	N/A	10 days	N/A	N/A	N/A	N/A
Vacation of Right-of-Way	N/A	N/A	N/A	N/A	10 days	None (if continued)
Easement Agreement	N/A	N/A	10 days	N/A	N/A	N/A
ADA Amendment	N/A	N/A	10 days	N/A	N/A	N/A
SIA Amendment	N/A	N/A	10 days	N/A	N/A	N/A
Sign Exception	N/A	10 days	N/A	N/A	N/A	N/A
Comprehensive Plan Amendment	N/A	10 days	10 days	N/A	N/A	N/A
Site Plan Review	N/A	15 days	N/A	N/A	N/A	N/A

**TOWN OF SILT, PROOF OF PUBLIC NOTICE AND CERTIFICATE OF MAILING**

**Project:** \_\_\_\_\_

I HEREBY AFFIRM THAT Public Notice requirements of the Silt Municipal Code have been met for the Public Hearing before the Silt Planning & Zoning Commission/Board of Trustees to be held on\_\_\_\_\_, 20\_\_

In addition, I hereby affirm that on\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_, I mailed first class, certified return receipt, a true copy of the attached Public Notice by placing the same postage prepaid in the United States Mail at\_\_\_\_\_, Colorado, addressed to those property owners on the submitted and approved list.

The Town has been provided with the following:

1. Certificate(s) of Mailing (original mailing receipts and return receipts)
2. Proof of publication from a newspaper of general circulation within the Town showing that prior to the meeting, the Public Notice was advertised as required per Silt Municipal Code.
3. List of names and mailing addresses of all surrounding property owners within 200 feet of subject property.

\_\_\_\_\_  
Name of Applicant (printed)

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

County of \_\_\_\_\_ )

)

ss.

State of \_\_\_\_\_ )

)

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
(fill in day) (fill in month) (fill in year)

By \_\_\_\_\_  
(name printed)

Witness my hand and official seal.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

## LAND USE APPLICATION FEES

Application	Fee	Deposit
Annexation 5+ Acres 5 Acres or Less	\$2,000 \$1,200	\$400
Annexation & Development Agreement Amendment	\$500	\$500
Boundary Adjustment/Lot Line	\$100	\$0
Condominiums (See Subdivision for Fees)	Varies	Varies
Easement Agreement and Amendments	\$500	\$500
Intergovernmental Agreement and Amendments	\$500	\$500
Major Subdivision-Sketch	\$500	\$500
Major Subdivision-Prelim	\$1,000	\$800
Major Subdivision-Final	\$600	\$500
Manufactured/Modular Home Park Permit	\$250	\$250
Minor Subdivision (PUD) -Sketch	\$500	\$500
Minor Subdivision (PUD)-	\$500	\$500
Minor Subdivision (PUD) -Final	\$500	\$500
Replat or Re-subdivision	\$500	\$0
Commercial/Multifamily Site Plan Review	\$500	\$0
Special Use Permit	\$350	\$250
Subdivision Exemption	\$250	\$0
Subdivision Improvement Agreement Amendment	\$400	\$400
Vacation of Right of Way	\$500	\$500
Variance	\$250	\$250
Zoning or Rezoning	\$600	\$500

***\*Deposits must be included with application submittal. The deposit is used as security for department staff and consultant time to review the project application. Applicant shall also pay for fees and charges incurred by the town, such as legal fees, planning fees, engineering fees, and filing or recording fees, plus an administrative fee of 15% of the total consultant charges.***

***\* For a complete list of the fee schedule, to include items not listed above, please contact the Community Development Department at (970) 876-2353 ext 110***

### ATTACHMENTS/EXHIBITS MUST BE COMPLETE FOR SUBMITTAL.

Incomplete applications **will not** be reviewed until deemed complete.

#### **Checklist below for Office use only.**

- 1] \_\_\_ A legal description of the property
- 2] \_\_\_ Evidence of legal ownership- May be a deed, title commitment, title insurance policy, or attorney's opinion of ownership
- 3] \_\_\_ Letter of consent- Required if the Applicant is not the property owner
- 4] \_\_\_ List of property owners within 200 feet. Call Garfield County Assessor's Office at 970-945-9134 for information
- 5] \_\_\_ Impact statement (description of how the proposed land use complies with the Town of Silt Municipal Code and Comprehensive Plan)
- 6] \_\_\_ A copy of the completed application in electronic format
- 7] \_\_\_ Provide two (2) printed copies and one digital copy of the full application and 24x36 copies of the Site Plan, Annexation Map, Plat Proposal or any other required documents for the proposed land use. Once approved, the Town will determine if any additional copies will be required
- 8] \_\_\_ Fee and Deposit Collected
- 9] \_\_\_ Other required documents

