

YELLOWSTONE COUNTY

Pre-Application Statement of Owner(s) or Agent(s)

The owner(s), contract purchasers (if any) and agents (if any) are required to submit this completed form on-line and any attachments along with a completed Special Review application form, including any required fees, for a special review to be processed by the Planning Division.

1. **Present Zoning:** _____
2. **Written description of the Special Review** including square footage of structures, total area of the site

3. **Subject Property Map:** please attach to this form
4. **Legal Description of Property:** _____

5. **Roster of persons who attended the pre-application neighborhood meeting:** please attach to this form
6. **A copy of the meeting notice.** please attach to this form
7. **A brief synopsis of the meeting results.** please attach to this form
8. **The undersigned affirm the following:**
 - a) The pre-application neighborhood meeting was held on the _____, day of _____, 20__.
 - b) The special review application is based on materials presented at the meeting.

Owner (s): _____ **Telephone:** _____

Address: _____ **Email:** _____

Agent (s): _____ **Telephone:** _____

Address: _____ **Email:** _____

COUNTY APPLICATION FORM

COUNTY SPECIAL REVIEW **County** Special Review # _____ - Project # _____

The undersigned as owner(s) of the following described property hereby request a Special Review as outlined in the Yellowstone County Zoning Regulations.

Present Zoning: _____

Proposed Special Review Use: _____

Property Tax ID # _____ COUNTY COMMISSIONER DISTRICT # _____

Legal Description of Property: _____

Address or General Location (If unknown, contact County Public Works): _____

Size of Parcel (Area & Dimensions): _____

Present Land-Use: _____

Proposed Land-Use: _____

*** Additional information may be required as determined by the Zoning Coordinator in order to fully evaluate the application.

Owner(s) _____
(Record Owner)

_____ (Address)

_____ (Phone Number) _____ (email)

Agent(s): _____
(Name)

_____ (Address)

_____ (Phone Number) _____ (Email)

I understand that the filing fee accompanying this application is not refundable, that it pays for the cost of processing, and that the fee does not constitute a payment for a Special Review. Also, I attest that all the information presented herein is factual and correct.

Signature: _____ Date: _____
(Record Owner – Digital Signature Allowed)