

CITY OF HAYDEN LAKE

9393 N. Strahorn Road
Hayden Lake, ID 83835
772-2161

SPECIAL USE PERMIT APPLICATION
(Limited Professional Offices & Restaurant in Overlay District)

▪ **SUBMITTALS**

An application for Special Use Permit (Permit) for limited professional offices or restaurant in an Overlay Zoning District is made by submitting the following information to the City Clerk:

1. The completed attached form and checklist;
2. Copy of all required documents including an accurate scale drawing of the site including any affected adjacent property and showing the location of all existing and proposed structures, the maximum dimensions of all existing and proposed buildings, streets, easements, property lines, setbacks, driveways, pedestrian walkways, off-street parking, off-street loading facilities and landscaped areas, buffering or other similar elements of site design.
3. An ownership list identifying property owners and residents within the subject property and within a radius of three hundred feet (300') from the external boundaries of the property.

▪ **DEADLINE FOR SUBMITTALS**

The completed form and documents must be submitted to the City Clerk not later than twenty-five (25) days prior to the date of a regular City Council meeting where a public hearing to consider the variance request can be set. The completed application shall be deemed accepted for the twenty-five (25) day processing period as of the date when all maps are and information have been filed, checked and accepted as complete by the City Clerk, as noted below. **This item will not be set for Council consideration until the application is complete and accepted.**

▪ **FEES**

The applicant shall pay to the City a fee of \$100.00. The applicant shall also pay the estimated costs to reimburse the City for the cost of all services provided by the City Engineer, City Attorney and other City Officials as well as other direct costs associated with processing the application including the costs of mailing and publishing notices.

Date Application and Fee Received: _____, 20____,
by City Clerk: _____

Date Application Accepted as Complete: _____, 20____,
by City Clerk: _____

Please type or print the following required information:

▪ **APPLICANT:**

Name of Applicant: _____

Mailing Address: _____

Telephone Number: _____

Filing Capacity:

_____ 1. Recorded property owner as of _____
(date)

_____ 2. Purchasing (under contract) as of _____
(date)

_____ 4. The authorized agent of any of the foregoing, duly authorized in writing. (Written authorization must be attached to the application)

Architect, Engineer and/or other professional assisting with application:

Name: _____

Mailing Address: _____

Telephone Number: _____

▪ **PROPERTY:**

Legal description of property including all adjacent streets:

Existing land use: _____

Surrounding land use: _____

Existing zoning: _____

Proposed zoning: _____

Existing jurisdiction city or county: _____

Existing Area of City Impact: _____

Taxing Districts providing services to the property:

Sewage Disposal _____

Water Supply _____

Fire District _____

Highway District _____

School District _____

Nearest City _____

Kootenai County

Other _____

A narrative describing your request, stating :

1. What conditions warrant annexation and the zoning designation requested: _____

2. How would the annexation and zoning advance the public health, safety, and welfare of the citizens of the City of Hayden Lake: _____

3. What, if any, detrimental effect would the request have on adjacent property and improvements: _____

4. What would be the effect on the Comprehensive Plan: _____

5. What is the intended use of the property following zoning and annexation: _____

6. Why it would be in the best interest of the City to approve this request for annexation and zoning: _____

7. What special conditions or contingencies should be applied to approval of this request for annexation and zoning: _____

8. Any other justification you feel is important and should be considered by the Council: _____

CERTIFICATION

_____, being first duly sworn, deposes and says that _____
_____ is the applicant in this application and knows the
contents thereof to be true to _____ knowledge.

Signed: _____

SUBSCRIBED and SWORN to before me this _____ day of _____, 20____.

Notary Public in and for the State of Idaho
Residing at _____
Commission Expires: _____

I have read and consent to the filing of this application as the owner of record of the area
being considered in this application.

Name: _____
Address: _____
Phone #: _____
Signature: _____