## **City of Taylorsville**

Community Development Department 2600 West Taylorsville Boulevard Taylorsville, Utah 84118 Phone: (801) 963-5400 Fax: (801) 955-2052



## **ZONING AMENDMENT APPLICATION**

PLEASE COMPLETE BOTH SIDES OF APPLICATION

	Zoning Map Amendment Zoning Text Amendment	
Subject Property Address	S:	Office Use Only
	Current Use:	FILING #:
	idwell) Number:	ENERGOV #:
Applicant Name:		FILING FEE:
Mailing Address:		DATE ACCEPTED:
City, State, Zip:		ACCEPTED BY:
Daytime Phone #:	Fax #:	RECEIPT NUMBER:
E-mail:		CURRENT ZONING DISTRICT:
Business Name (if applica	able):	MEETING DATE(S):
Property Owners Name (	if different):	
Mailing Address:		Application approved: □ yes □ no
City, State, Zip:		Conditions: □ ves □ no
Daytime Phone #:	Fax #:	Chair, City Council
Describe your request in	detail (use additional paper if necessa	ry):
Authorized Signature:		Date:

Note: Obtaining approval of a zoning amendment from the Taylorsville City Council does not eliminate the necessity of obtaining a building permit, business license or approval from other agencies (if applicable) prior to start of construction or land use. Please contact the appropriate Taylorsville City department regarding additional required permits.

## FOR YOUR INFORMATION...

For more information regarding zoning amendments and application procedures, please refer to **Taylorsville Information Form P-9 Applying for a Zoning Amendment** available from the Community Development Department at Taylorsville City Hall or online at www.taylorsvilleut.gov.

Property Ow	ner's Affidavit
I (we)	_, being first duly sworn, depose and say that I (we) am
	is application: that I (we) have read the application and thits contents; and that said contents are in all respects
Owner's Signature	Owner's Signature (co-owner if any)
Subscribed and sworn to before me this	_ day of
	Notary Public Residing in
	My commission expires:
I (we),	thorization _, the owner(s) of the real property located at _,in the City of Taylorsville, Utah, do hereby appoint _ as my (our) agent to represent me (us) with regard to
this application affecting the above	described real property, and authorize _ to appear on my (our) behalf before any City board or
commission considering this application.	
Owner's Signature	Owner's Signature (co-owner if any)
On the day of day of duly acknowledged to me that they executed the same	_ the signer(s) of the above Agent Authorization who
	Notary Public Residing in
	My commission expires: