



# Park County Planning & Zoning

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Rec. By: _____
Date: _____
Receipt #: _____
App. #: BZA _____

## BUILDING/ZONING PERMIT APPLICATION\* (2 pages) Fee: \$75.00

This application is required to obtain a Building/Zoning (use) Permit within unincorporated areas of Park County; its purpose is to ensure that uses and construction conform to applicable zoning requirements. **Submission of this application does not constitute permission to proceed with development. A Building/Zoning Permit must be issued by the Planning and Zoning Department before construction may commence.** A Building/Zoning Permit is required to: locate, relocate, erect or construct any building(s) or structure(s); enlarge the outside dimensions of any building or structure; reconstruct any building or structure within the designated floodplain, change the use or location of any building or structure; or change the use or occupancy rating of a building so as the increase the building’s sewage design flow. If construction and/or use is not commenced within 365 of permit approval, the permit shall expire. **\*Visit the Public Works Dept. for addressing and right-of-way permit requirements.**

<b>APPLICANT INFORMATION:</b>	<b>OWNER INFORMATION (if different from applicant):</b>
Name: _____	Name: _____
Mailing Address: _____	Mailing Address: _____
Phone: _____	Phone: _____
Email: _____	Email: _____

**PROPERTY INFORMATION:**

Physical Address: \_\_\_\_\_  Not addressed

Property ID # or Deed Recording #: \_\_\_\_\_

Subdivision Name (if applicable\*): \_\_\_\_\_ Lot #: \_\_\_\_\_

\*Please refer to any covenants/agreements/special conditions that may apply to development within the subdivision.

<b>TYPE OF DEVELOPMENT</b>	<input type="checkbox"/> New Construction/Use <input type="checkbox"/> Change of Use
<u>Type of Construction, Building or Use (check one):</u>	
<input type="checkbox"/> Single Family Residence (# Bedrm: _____)	<input type="checkbox"/> Accessory Structure: _____
<input type="checkbox"/> Rental (# Bedrm: _____) Term (days/mos) _____	<input type="checkbox"/> Business: _____
<input type="checkbox"/> Guest House (# Bedrm: _____)	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Employee Housing (# Bedrm: _____)	
<input type="checkbox"/> Manufactured (Mobile) Home (# Bedrm: _____)	
<input type="checkbox"/> RV (>90-day occupancy)	
<input type="checkbox"/> Addition of: _____	<b>CHANGE OF USE:</b> From: _____ To: _____
To: _____	

**DIMENSIONS:** Building Footprint: \_\_\_\_\_ sq. ft.                      Max Height: \_\_\_\_\_ ft.

Total Floor Area (all floors combined): \_\_\_\_\_ sq. ft.

**★COMPLETE ALL APPLICABLE SUBMITTAL REQUIREMENTS ON PAGE 2 ★**

• **PROJECT DESCRIPTION (SPECIFY USE/PURPOSE):** \_\_\_\_\_

- **SEPTIC:** Is a new or expanded septic system needed to support this development?  YES  NO
  - If yes, a small wastewater permit will be required before a building permit will be issued.

**FOR ALL PROPOSALS, SUBMIT A DETAILED DRAWING SHOWING THE FOLLOWING:** (Note: *Aerial photos and property maps are available on the County MapServer – ask Planning Staff for help.*)

- Existing structures on the entire property and their current use(s);
- The location of the proposed building, accessory building or other structure/use proposed to be constructed, erected, relocated or changed;
- Distances from the structure/use to property lines and nearby roads (must be 20ft from a County Road right-of-way) and streams on or near the property (if applicable); and
- Required space for parking (e.g., two spaces per dwelling).

**PROVIDE EVIDENCE OF LEGAL ACCESS TO THE PROPERTY (Deed with easement, easement, County right-of-way/access permit, WYDOT permit, subdivision plat, etc.):** \_\_\_\_\_

**SIGN HERE:** *In accordance with Wyo. Stat. §1-2-104, I certify under penalty of false swearing that the foregoing is true and the information provided in this application is accurate and complete. I agree that providing incomplete or inaccurate information may void or delay any and all permits authorized under this application. I further understand that any permit granted under this application by the Park County Planning and Zoning Department does not approve any continued or future violation of County regulations or State law. I further agree to comply with all County regulations and State laws pertaining to this application and authorize representatives of Park County to enter upon the abovementioned property for inspection purposes before, during and/or after the permitting process to ensure compliance. I further acknowledge that if signing on behalf of co-owners, multiple owners, a corporation, partnership, Limited Liability Company or similar entity, the undersigned hereby swear(s) that authorization is given, to the full extent required, with the necessary and appropriate approval, allowing the undersigned to act on behalf of such entity. I understand that proposed roads, easements, utilities, road cuts, access or related actions require me to contact the Park County Public Works Department to discuss special permitting requirements. I also understand that additional permitting may be necessary prior to the authorization of a Building/Zoning Permit.*

Owner’s Name (required)	Owner’s Signature (required)	Date
Applicant’s Name (if not the owner)	Applicant’s Signature	Date

**BELOW - For office use only**

Zoning District (circle one):	GR-M	GR-P	GR-40	GR-35	GR-20	GR-5	RR-2	R-H	C	I	T
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- Use Classification: \_\_\_\_\_ Planning Area: \_\_\_\_\_
- SWW:  Adequate (Permit #: \_\_\_\_\_)  New/upgrade req’d (Permit #: \_\_\_\_\_)  N/A
- 20-foot from CR ROW?  YES  NO - If no, notify applicant of requirement.
- In an ag overlay zone?  YES  NO - If yes, consult ag overlay regs & notify applicant of dust/noise considerations.
- In a flood overlay zone?  YES  NO - If yes, contact applicant regarding floodplain development reqs.
  - LOMA \_\_\_\_\_  FPD PERMIT \_\_\_\_\_
- In an airport overlay zone?  YES  NO - If yes, consult airport overlay regs.
- Is an SUP required?  YES  NO - If yes, SUP# \_\_\_\_\_
- Site Plan Review required?  YES (over 5,000sq.ft. building floor area and/or >1 acre)  NO
- Permit approved?  YES  NO **Staff Initials:** \_\_\_\_\_
  - If yes, permit number issued: \_\_\_\_\_
  - Date approved: \_\_\_\_\_ Expiration Date: \_\_\_\_\_
  - If no, reason: \_\_\_\_\_