

Park County Planning & Zoning

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Rec. By:	
Date:	
Receipt #:	
App. #: SUPA	

SPECIAL USE PERMIT (SUP) APPLICATION*(4 pages) Fee: \$350.00*

This application is required to obtain a Special Use Permit (SUP) within unincorporated areas of Park County. Submission of this application does not constitute permission to proceed with development or the proposed use. Special Use Permit approval is required from the Board of County Commissioners before commencing or establishing any use specified in Chapter IV, Section 2.e. Table 4-1: Schedule of Uses in the Park County Development Standards and Regulations. *The applicant is responsible for paying mailing fees for neighbor notifications and publication fees for public hearing notices.

APPLICANT INFORMATION:	OWNER INFORMATION (if different from applicant):						
Name:	Name:						
Mailing Address:							
Phone:	Phone:						
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 dev	elopment wi	thin the s	ubdivision.			
ANSWER THE FOLLOWING QUESTIONS REGARDING	THE PROPOSED U	SE:					
1. Have any other SUPs been granted for this parcel	□ YES	□ NO	D UNSURE				
2. # of buildings to be utilized for the use		D N/A					
 Total/combined floor area of all floors of all build be utilized for the use 	sq. ft.						
4. # acres to be utilized for the use		acre					
5. If a business, will it be located in the proprietor's	home?	□ YES	□ NO	□ N/A			
6. Are living quarters or lodging part of the proposed	. Are living quarters or lodging part of the proposed use?						
7. # of resident employees	Full-Time	Part	t-Time	□ N/A			
8. # of non-resident employees	Full-Time	Part	t-Time	□ N/A			
9. Term of Use:	□ Single Event	🗆 Temp	orary	Permanent			
10. Is an increase in traffic expected to result from t	Is an increase in traffic expected to result from this use?			□ NO			
11. What are the planned days/hours of operation?							
12. How much material will be removed (for mines)		cu. ft.	D N/A				
13. If tower, antenna or wind turbine, what is the he	□ <35ft	□ ≥35f	t 🗆 N/A				

CATEGORIZE THE PROPOSED USE (check all that apply):							
Residential	Residential Business	□ Agricultural	Commercial				
Recreational	Temporary	□ Transportation	Industrial				
Institutional	□ Large Impact Structure	Community/Public/Utility/Qu	ity/Public/Utility/Quasi-Public				

WRITTEN DESCRIPTION OF THE PROPOSED USE(S): (Please include a detailed statement about the full scope/extent of the intended use. Quantify the impacts - for example, explain any noise, visual and/or air quality impacts expected to result from the initiation/operation of the use, both onsite and to adjacent properties. Please be thorough as any permit authorized will be based upon facts provided herein.)

PROVIDE <u>WRITTEN</u> STATEMENTS WITH YOUR APPLICATION SUMMARIZING EACH OF THE FOLLOWING TOPICS (IF APPLICABLE). YOU MAY PROVIDE SUPPORTING DOCUMENTATION THAT FURTHER EXPLAINS SUMMARIZED MATERIALS; HOWEVER, STAFF AND THE PLANNING AND ZONING COMMISSION HAVE LIMITED TIME TO REVIEW LENGTHY SUBMISSIONS.

- Evidence that an adequate water supply (quantity, quality and dependability) for the use is or will be available.
- Evidence that an adequate means of sewage and wastewater disposal is or will be available.
- Soils report prepared by the local conservation district, professional soils engineer or geologist when appropriate;
- Proposed covenants, if any;
- Statement of how the approval standards for a Special Use Permit can be met by the proposal;
- If special criteria as defined in *Standards for Specific Uses* have been established for the proposed use, a statement of how these criteria will be met;
- If in an Airport Overlay District, a written recommendation from the appropriate board or official;
- If in an irrigation district, a plan regarding the attached water rights and easement for irrigation facilities.

INCLUDE THE FOLLOWING GRAPHIC MATERIAL WITH YOUR APPLICATION (IF APPLICABLE):

- Vicinity map;
- Detailed plan-view drawing showing building locations, parking areas, access and circulation, storm water drainage and activity areas (include boundary of entire area impacted by the proposed use);
- Building floor plans and heights;
- Map showing topography and natural features

The Planning and Zoning Commission and Board of County Commissioners approve Special Use Permits based upon the following approval standards. Complete applications will include all the written and graphic material needed to assist with the decision-making process and addressing each standard.

- Compatibility and Impacts: The use is in harmony and compatible with surrounding land uses and with the neighborhood and will not create a substantial adverse impact on adjacent properties;
- Services and Infrastructure: Adequate services and infrastructure are available to serve the use, or the applicant has agreed to provide services and infrastructure in sufficient time to serve the proposed use;
- Specific Criteria: The use complies with all specific criteria stated in these regulations for the use; and
- Overlay Districts: The use complies with additional requirements of overlay districts (i.e., floodplain, agricultural or airport), if applicable.

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 Board of Commissioners does not approve any continued or future violation of County regulations or State law. I further agree to comply with all County regulations and laws of the State of Wyoming 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 also understand that additional permitting may be necessary prior to or after the authorization of a Special Use 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	Т
• In GR-M? 🗆 NO 🛛 YES -	- Referre	ed applic	ation to N	/ILPAAC o	n:			_			
Within one mile of a city?	? 🗆 NO	U YES ·	– Referred	d applicat	ion to			on	:		
 Planning Area: 											
	require S	ite Plan I	Review.								
 Mobile Home Mobile Home Park** Multi-family housing** Single family dwelling <u>Residential Business</u> Major home occupation Cottage industry** <u>Agricultural Use</u> 			n Review. Temporary Use Construction staging area, minor** Construction staging area, major** Special Event Temporary heliport Highway/road maintenance area Work Camp** Transportation Use Bus Terminal** Heliport** Landing Strip** Commercial Airport** Rail facility** Rail facility** Maior commercial recreation** Minor outdoor recreation facility** Major recreation facility** Dude ranch and resort** Parking/outfitting Ski center**					Commercial Use Minor commercial business** Major commercial business** Agricultural support business** Agricultural support business** Adult use** Industrial Use Minor industrial use** Major industrial use** Major wholesale business** Major wholesale business** Rock products mine, large** Rock products mine, small** Rock products mine, minor Salvage yard** Value-added agricultural** Slaughterhouse/Abattoir Crematorium Accessory Use Large impact structure**			
 Site Plan Review Req'd (Total Building Squar More than one acree SWW: Adequate (Per 20-foot from CR ROW? In an ag overlay zone? In an ag overlay zone? In a flood overlay zone? In an airport overlay zor Notes:	re Footag impacte mit #: U YE VE U YE LC ne? U YE	ge > 5,00 ed? S	00? □ YES □ YES 0 - If no, 0 - If yes 0 - If yes 0 - If yes	□ NO □ NO) □ Ne notify ap , consult	applicant of ag overlay applicant airport ov	de req'd require regardin _	(Permit ment. notify ap ng flood PERMIT gs.	#: oplicant o olain dev	of dust/ relopme	/noise ent reqs	□ N//
 PZ Comm Recommended BCC Approved?											
 If no, reason: 											
						St	att Initia	ls:			