



Application for Bear Lake County Overlay Zone

 Fee \$200

 Property for re-zoning is adjacent to year round county maintained approved road

 Road way is 18" wide or greater

Checks for fees should be written out to Bear Lake County. Application fee, this application and the requested attachments should be submitted to the Bear Lake County Court House, attention of the Bear Lake Planning Administrator, PO Box 190, Paris, Idaho 83261. Or emailed to: mitch@bearlakeregionalcommission.org

Fees collected are for the processing, review and recommendation of the Bear Lake Planning and Zoning Commission in reference to this application.

Any questions in regards to this application or the process of re-zoning to Rural Community Zoning, call 208-847-5275.

The Bear Lake Planning and Zoning Commission have 45 days from the date received to make their recommendation of approval or denial to the Bear Lake County Commissioners. **If this application is denied by the Bear Lake County Commission you may appeal to the district court.** Planning and Zoning Commission, the applicant does have the right to submit this application to the Bear Lake County Commissioners for approval.

Applicant: _____

Date Submitted: _____

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

Owner: _____

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

State of _____)

County of _____) ss

AFFIDAVIT OF LEGAL INTEREST

I, (name) _____, (address) _____,
(city) _____, (state) _____,

Being first duly sworn upon oath, depose and say:

1. That I am the record owner of the property described herein, and I grant my permission to:
(name) _____, (address) _____,
to submit this application pertaining to that property addressed or located at:
_____.
2. I agree to indemnify, defend and hold the County of Bear Lake and its' employees harmless from any claim of liability resulting from any dispute as to the statement contained herein or as to the ownership of the property which is the subject of the application.

Dated this ____ day of _____, 20____. (signature) _____

SUBSCRIBED AND SWORN to before me the day and year first above written.

Notary Public for _____

Residing at: _____

My Commission Expires: _____

Engineer: _____

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

Surveyor: _____

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

Other Representative:

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

Other Representation: _____

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

With my initial below I affirm my understanding and agreement that I or my representative listed above must attend all meetings and hearings as listed below to meet the 45 day requirement of the Bear Lake Planning and Zoning Commission to provide recommendations pertaining to this application to the Bear Lake County Commissioners.

I understand and agree that payment of fees is required prior to the Bear Lake Planning and Zoning Commission scheduling any staff meeting, public hearings, planning and zoning meetings, board meetings or other meetings regarding this application.

(To be filled out and returned to the applicant to inform the applicant of the meeting schedule for this application.)

Method of Notification of Applicant

☐ Mail

☐ Fax

☐ E-Mail

Applicants initials: _____

Address / General Location of Site: _____

Bear Lake County parcel number(s) of property: _____

Acres of land proposed for change: _____

The Planning and Zoning Commission requires submission of this application and the following items in order to be accepted as a complete application.

- Note: The Bear Lake County Overlay Zone is only used to re-zone Ag zoning to Rural Community zoning– Ag to Residential Use.

- ☐ Provide a written narrative that describes the justification for the granting of this application, addressing how the request fits with the county's comprehensive plan. If applicable, the narrative should address zoning desired, characteristics of the property that make such zoning desirable, and how such zoning is compatible with the surrounding area.
- ☐ Legal description of the property
- ☐ Copy of Deed (proof of title)
- ☐ Vicinity map. **This can be obtained from google earth or the assessor's office. Attributes on the map that will aid in the decision making process include but are not limited to: property lines, streets, landmarks, proposed zoning, and other such items.**
- ☐ Names and address of all adjoining owners of property and residents within 300 feet of the external boundaries of the land being considered as shown on record in the Bear Lake County Assessor's Office 208-945-2155 x4.

I understand this application will not be accepted unless all required information is submitted and the application fee is paid. I understand that all applicable fees must be paid before a public hearing date will be scheduled.

I affirm that all the information, statements, attachments, and exhibits transferred with this document are true and accurate to the best of my knowledge.

Applicant's Name, printed

Applicant's Signature

Date

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The Bear Lake County Planning and Zoning Commission recommend to the Bear Lake County Commissioners that this application for re-zoning to Rural Community Zoning be:
APPROVED or DENIED

Date: _____

Comments: _____

BEAR LAKE COUNTY COMMISSIONERS USE:

Bear Lake County Commissioners have reviewed this application for re-zoning to Rural Community Zone.

- ☐ APPROVED comments: _____
- ☐ DENIED comments: _____

Signed by Bear Lake County Commissioners:

(sign and date)

(sign and date)

(sign and date)