

Town of Apple Valley

1777 N Meadowlark Dr Apple Valley UT 84737 T: 435.877.1190 | F: 435.877.1192 www.applevalleyut.gov

Fee: \$500.00 + Acreage Fee 1 – 100 Acres: \$50.00/Acre 101 – 500 Acres: \$25.00/Acre \$10/Acre 501 + Acres:

Zone Change Application						
Applications Must Be Submitted A Minimum of 21 Days In Advance of The Planning Commission Meeting						
Name: Bang Properties - Kerry Bang		Phone: 435-619-5379				
Address:		^{Email:} ba	ngfabrication@gmail.com			
City: St George	State	UT	^{Zip:} 84770			
Agent: (If Applicable)		Phone:				
Address/Location of Property: Apple Valley Main	Parcel ID	AV-13	54-B			
Existing Zone: OST		Proposed Z	one: C-2, CTP			
Reason for the request Zone change for Tiny Home project and Commercial						
N .						

Address/L	ocation of Property: Apple Valley Main	Parcel ID:	AV-1354-B		
Existing Zone: OST			Proposed Zone: C-2, CTP		
	or the request Zone change for Tiny Home pr	oject an	d Commercial		
	Il Requirements: The zone change application				
✓ A.	The name and address of every person or cor	npany th	e applicant represents		
/ B.	An accurate property map showing the existing and proposed zoning classifications				
v C.	All abutting properties showing present zoning classifications				
V D.	An accurate legal description of the property to be rezoned				
v E.	Stamped envelopes with the names and address's of all property owners within 500' of the boundaries of the property proposed for rezoning. Including owners along the arterial roads that may be impacted				
F .	Warranty deed or preliminary title report or other document (see attached Affidavit) showing evidence the applicant has control of the property				
Note:	To avoid delays in processing your Zone Change request, it is important that all applicable information noted above, along with the fee, is submitted with the application. An incomplete application will not be scheduled for the Planning Commission. Planning Commission meetings are held on the second and fourth Wednesday of each month at 6:00 pm. Submission of a completed application does not guarantee your application will be placed on the next PC meeting agenda. It may be placed on the next available PC meeting agenda.				
Official	Use Only				
Date Re	eceived:	Ву:			

Official Use Only		
Date Received:	By:	
Date Application Deemed Complete:	Ву:	

AFFIDAVIT PROPERTY OWNER

STATE OF UTAH)				
)§ county of washington)				
V V	vided identified in the attached plans and other of my (our) knowledge. I (We) also acknowledge at the process for which I (We) am (are) applying			
Subscribed and sworn to me this 24 day of _	AUG , 20 20.			
NOTARY PUBLIC Mary J Quinn 700528 My Commission Expires May 25, 2022 8 TAPE OF UTAH	Many Julia Notary Public Residing in: 1930 W Seenst Blud St George My Commission Expires: May 25, 2072			
AGENT AUTHORIZATION				
I (We),, the owner(s) of the real property described in the attached application, do authorize as my (our) agent(s) to represent me (us) regarding the attached application and to appear on my (our) behalf before any administrative body in the Town of Apple Valley considering this application and to act in all respects as our agent in matters pertaining to the attached application.				
	Property Owner			
	Property Owner			
Subscribed and sworn to me this day of _	, 20			
	Notary Public			
	Residing in:			
	My Commission Expires:			