

SANDOVAL COUNTY PLANNING & ZONING DEPARTMENT

CONDITIONAL USE PERMIT/VARIANCE APPLICATION

APPLICATION FOR: CONDITIONAL USE PERMIT VARIANCE VARIANCE
APPLICANT:
ADDRESS:
PHONE: E-MAIL:
AGENT:
ADDRESS:
PHONE: E-MAIL:
EXISTING LEGAL DESCRIPTION OF PROPERTY:
TOWNSHIP RANGE SECTION MRGCD Tract No. (If applicable) MRGCD Map No. (If applicable) MRGCD Map No. (If applicable) Subdivision Lot No. Block No. Total Acres: Number of Lots (existing) (proposed)
Present Zoning and Use of Property: PROPERTY ADDRESS:
SIGNATURE:DATE:
FOR OFFICE USE ONLY: Application Received By: