



Conditional Use Permit - Non Subdivision

Type	Fee	Type	Fee
<input type="checkbox"/> Commercial Amendment	\$75.00	<input type="checkbox"/> Commercial	\$200.00
<input type="checkbox"/> Home Occupation Disruptive	\$100.00	<input type="checkbox"/> Home Child Care or Preschool	\$150.00
<input type="checkbox"/> R-1 Animal Rights	\$35.00	<input type="checkbox"/> Accessory Apartment*	\$200.00
<input type="checkbox"/> Temporary Structure	\$100.00	<input type="checkbox"/> Non Conforming Use/Structure	\$200.00

If the application is not the business owner, then this application must be accompanied by a notarized statement from the owner consenting to the "Owner Agent Authorization Form." Additionally, documents should be submitted for each application according to the accompanying "Site Plan or Submittal Requirements" chart.

The following "Home Occupation" business types require a fire and/or/building inspection.

- Nail or Hair Salon
- Wood or Metal Working Shop
- Preschool or Day Care Facility

*Accessory apartment applications must be provided by the property owner.

To arrange for a fire inspection, contact the Smithfield City Fire Department. To arrange for a building inspection, contact the Cache County Building Department. A minimum of 24 hour notice is required before the inspection can be conducted.

Owner Information

Name _____

Address _____

Phone _____

Email _____

Applicant Information

Name _____

Address _____

Phone _____

Email _____

Parcel Information

Address _____

Size _____ sq. ft. _____ acres Parcel ID _____ Current Zone _____

Property Use _____

Other _____ (indicate distance to nearest residence)

Office Use Only

Date Application Received _____ Date Application Approved _____

Approved Denied



Project Information (attach additional sheets if necessary)

Project Name _____

Project Description _____

*If this application is amending an existing CUP, describe the amendment(s).

Days and Hours of _____ am/pm to _____ am/pm

Business Operation (circle) Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Project Timetable Expected Start Date _____ Expected Finish Date _____

Alcohol Information Will alcohol be served? _____ Yes _____ No

(if "yes") _____ # of fixed seats _____ distance to nearest school

Noise Information Will there be audible noise outside of the boundaries of the property where the business is located?

_____ Yes _____ No

Canal Information Is there a canal crossing the property for which the CUP is being requested? _____ Yes _____ No

(if "yes") Name of the Canal or Irrigation Company _____

Applicant Signature

Brian Boudrero, Planning and Zoning