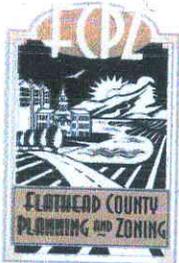




1035 First Ave West  
 Kalispell, MT 59901  
 OFFICE: 406.751.8200  
 FAX: 406.751.8210  
 Email: [planningweb@flathead.mt.gov](mailto:planningweb@flathead.mt.gov)  
 Web: [flathead.mt.gov/planning\\_zoning](http://flathead.mt.gov/planning_zoning)



## Flathead County Planning & Zoning

1035 1<sup>st</sup> Ave W, Kalispell, MT 59901  
 Telephone 406.751.8200 Fax 406.751.8210

### CONDITIONAL USE PERMIT APPLICATION<sup>1</sup>

Submit this application, all required information, and appropriate fee (see current fee schedule) to the Planning & Zoning office at the address listed above.

FEE ATTACHED \$ 700<sup>00</sup> ~~\$750~~

**PROPOSED USE** (as described in the Flathead County Zoning Regulations):

NO CHANGE IN USE. USE PERMIT IS REQUIRED TO INSTALL A WIND TURBINE WHICH WILL EXCEED THE 35' ZONING REQUIREMENT.

**OWNER(S) OF RECORD:**

Name: MELODY WATTS Phone: (406) 862-6365

Mailing Address: 4899 HWY 93S

City, State, Zip Code: WHITEFISH, MT 59937

Email: MIDWAY@CENTURYTEL.NET

**PERSON(S) AUTHORIZED TO REPRESENT THE OWNER(S) AND TO WHOM ALL CORRESPONDENCE IS TO BE SENT:**

Name: JEFF ARCEL Phone: (406) 250-7853

Mailing Address: P.O. BOX 580

City, State, Zip Code: WHITEFISH, MT 59937

Email: JEFF@MOTHERSPOWER.COM

**LEGAL DESCRIPTION OF PROPERTY** (Refer to Property Records):

Street Address: 4899 HWY 93S S 25 T 30 N R 22 W

Subdivision Name: WHITEFISH, MT 59937 Tract No(s): \_\_\_\_\_ Lot No(s): 284 Block No. \_\_\_\_\_

1. Zoning District and Zoning Classification in which use is proposed (EXAMPLE: Bigfork Zoning District, SAG-5 zoning classification):

ZONING B1, COMMERCIAL RURAL

2. Explain how the proposed use meets all of the required criteria below. ALL CRITERIA MUST BE DISCUSSED. If criteria are not applicable, please explain why. Attach drawings, additional text, site plans, and any other documents that will assist staff in reviewing the proposed use. The more information...



**A. Site Suitability.**

The site is suitable for the use. This includes:

- (1) adequate usable space

THE PROPOSED WIND TURBINE HAS  
A 6x6 CONCRETE FOUNDATION WHICH  
WILL BE THE BASE FOR A 45' MONOPOLE  
TOWER. ADEQUATE USABLE SPACE IS AVAILABLE  
(SEE ATTACHED SITE MAP)

- (2) adequate access

THE SITE HAS ADEQUATE ACCESS

- (3) absence of environmental constraints

THERE ARE NO ENVIRONMENTAL CONSTRAINTS  
WHICH APPLY.

**B. Appropriateness of Design.**

The site plan for the proposed use will provide the most convenient and functional use of lot. Consideration of design should include:

- (1) parking scheme

PARKING FOR THE SITE WILL NOT BE  
AFFECTED.

- (2) traffic circulation

THE REQUESTED CONDITIONAL USE  
WILL NOT AFFECT TRAFFIC CIRCULATION.

- (3) open space

NOT APPLICABLE

- (4) fencing, screening

NOT APPLICABLE



- (5) landscaping  
NONE
- (6) signage  
NONE
- (7) lighting  
NO CHANGE FROM CURRENT LIGHTING AT THE SITE

**C. Availability of Public Services and Facilities**

The following services and facilities are to be available and adequate to serve the needs of the use as designed and proposed:

- (1) sewer  
NO CHANGE FROM CURRENT SEWER SETUP
- (2) water  
NOT APPLICABLE - NO CHANGE
- (3) storm water drainage  
NOT APPLICABLE - NO CHANGE
- (4) fire protection  
NOT REQUIRED
- (5) police protection  
NONE REQUIRED

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(6) streets

NO IMPACT OR CHANGES REQUIRED

**D. Immediate Neighborhood Impact**

The proposed use will not be detrimental to surrounding neighborhoods in general. Typical negative impacts which extend beyond the proposed site include:

(1) excessive traffic generation

NONE

(2) noise or vibration

MINIMAL NOISE CHANGE AT SITE  
SKYSTREAM SOUND PRESSURE LEVEL IS IN  
THE 40-50 DB RANGE WHICH IS QUIETER THAN  
BACKGROUND NOISE IN A HOME OR OFFICE.  
QUIETER THAN WIND BLOWING THROUGH TREES.

(3) dust, glare or heat

NONE

(4) smoke, fumes, gas, or odors

NONE

(5) inappropriate hours of operation

NOT APPLICABLE

3. The following proposed uses shall meet additional requirements, known as "Conditional Use Standards" as outlined in Chapter 4 the Flathead County Zoning Regulations and require consultation with a staff planner PRIOR to application submittal:

- 4.01 Animal Hospitals, Kennels, Animal Shelters, Veterinary Clinics
- 4.02 Bed and Breakfast Establishments/Boarding Houses
- 4.03 Camp or Retreat Center
- 4.04 Caretaker's Facility in AG, SAG, and R-1 Districts
- 4.05 Cluster Housing Development in Residential Districts

- 4.06 Commercial Caretaker's Facility in B-2, B-3, I-1, I-1H, and I-2 Districts
- 4.07 Contractors Storage Yard in AG and SAG Districts
- 4.08 Day Care Centers- 13 or More Individuals
- 4.09 Electrical Distribution Stations
- 4.10 Extractive Industries
- 4.11 Family Hardship Dwellings
- 4.12 Manufactured Home Parks
- 4.13 Mini-Storage, Recreational Vehicle Storage
- 4.14 Motor Coach Subdivisions
- 4.15 Recreational Facilities (see also 7.17.040)
- 4.16 Temporary Uses



Consultation with Planner:

Date \_\_\_\_\_ Planner's Signature \_\_\_\_\_

**INSTRUCTIONS FOR CONDITIONAL USE PERMIT APPLICATION:**

1. Answer all questions. Answers should be clear and contain all the necessary information.
2. In answering question 1, refer to the classification system in the Zoning Regulations.
3. In answering questions 2 and 3, be specific and complete. Please use a separate sheet of paper to discuss the appropriate topics.
4. Copy of plot plan/site plan must be submitted with each application, with all existing or proposed structures shown, and distances from each other and from the property line. *If you are submitting a plan larger than 11x17 in size, please include 7 copies.*
5. A **Certified** Adjoining Property Owners List must be submitted with the application (*see forms below*). The list will be sent directly to the Planning & Zoning office, unless you request otherwise. This list is valid for a period of 6 months from date generated. You may also get a certified adjoining landowners list from a title company if you choose.
  - *(The buffer should be 150 ft. for all areas with the following exceptions: Administrative Conditional Use Permits, standard Conditional Use Permits, and Planned Unit Development (PUD) applications within the Lakeside Zoning District require a 300 ft. buffer.)*

\*\*\*\*\*  
\*\*\*\*\*

*I hereby certify under penalty of perjury and the laws of the State of Montana that the information submitted herein, on all other submitted forms, documents, plans or any other information submitted as a part of this application, to be true, complete, and accurate to the best of my knowledge. Should any information or representation submitted in connection with this application be incorrect or untrue, I understand that any approval based thereon may be rescinded and other appropriate action taken. The signing of this application signifies approval for the Flathead County Planning & Zoning staff to be present on the property for routine monitoring and inspection during the approval and development process.*

Dan Schiff  
Applicant Signature

\_\_\_\_\_  
Date