



# Flathead County

## Planning & Zoning

40 11<sup>th</sup> Street West, Suite 220 Kalispell, MT 59901

Telephone 406.751.8200

### DUO CERTIFICATION APPLICATION

Submit this application, all required information, and the fee to the Planning & Zoning office at the address listed above.

**OWNER(S) OF RECORD:**

**FEE ATTACHED \$60**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

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

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

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

Street Address: _____	S _____	T _____	R _____
Subdivision Name: _____	Tract No(s). _____	Lot No(s). _____	Block No _____

**Existing Structures on the Site:**

\_\_\_\_\_  
\_\_\_\_\_

**Project Information:** (Maps and drawings must be attached)

- A. What are you Proposing?       Condominiums    Townhomes    Conversion
- B. Is DOU Draft Attached?       Yes    No
- C. Is a Site Plan Attached?     Yes    No
- D. Is the Property Zoned?       Yes    No

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*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in connection with this application be incorrect or untrue, I understand that any approval based thereon may be rescinded and other appropriate action taken.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.*

\_\_\_\_\_  
Owner(s) Signature (*all owners must sign*)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Signature (*if different than above*)

\_\_\_\_\_  
Date



40 11th Street West, Ste. 220  
 Kalispell, MT, 59901  
**OFFICE:** (406) 751-8200  
**EMAIL:** [planning.zoning@flathead.mt.gov](mailto:planning.zoning@flathead.mt.gov)  
**WEB:** [flathead.mt.gov/planning\\_zoning](http://flathead.mt.gov/planning_zoning)

## CUSTOMER SERVICE SURVEY

Our mission is to provide you with the best possible service. Please help us serve you and others better by taking a few minutes to answer the questions below. Our office genuinely appreciates your time and your feedback.

**What was the nature of your contact with us?** (Please check all that apply)

- General Information
- Permitting (Lakeshore, Floodplain, Zoning, Subdivision)
- Pre-application Conference
- Other \_\_\_\_\_

<b>Please Check as Appropriate:</b>					
	<b>Strongly Agree</b>	<b>Agree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>No Comment</b>
Staff was courteous and helpful					
Staff provided accurate information to me					
Staff response was considerate of my time					
My overall experience was positive					
<b>Please complete the section below if your contact with us involved permitting:</b>					
The permitting process was understandable					
The regulations were understandable					
Application instructions were understandable					
Terms and conditions of the permit were understandable					

We provide opportunities for staff to be recognized for exemplary customer service. Please indicate the names of any staff person(s) you would like to commend:

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If you feel we fell short in meeting your service expectations, please describe the situation including the name of the staff person involved (if applicable) and the date the incident occurred:

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As a result of your experience with us, what service-related improvement(s) can you recommend?

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**Contact Information (Optional)**

Your name: \_\_\_\_\_

Email: \_\_\_\_\_ Daytime phone: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Date submitted: \_\_\_\_\_

**Please hand deliver, email, fax or mail form to:**

Flathead County Planning and Zoning  
40 11<sup>th</sup> Street West, Suite 220  
Kalispell, MT 59901  
Email: [Planning.Zoning@flathead.mt.gov](mailto:Planning.Zoning@flathead.mt.gov)  
Phone: (406) 751-8200