

# Flathead County

Planning & Zoning
40 11<sup>th</sup> Street West, Suite 220 Kalispell, MT 59901 Telephone 406.751.8200

## **SITE PLAN APPLICATION**

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 \$			
OWNER(S) OF RECORD:				
Name:		Phone:		
Mailing Address:				
City, State, Zip Code:				
Email:				
PERSON(S) AUTHORIZED TO REPRESENT THE CORRESPONDENCE IS TO BE SENT:	OWNER(S) AN	D TO WHOM AI	L	
nme:		Phone:		
Mailing Address:				
City, State, Zip Code:				
Email:				
LEGAL DESCRIPTION OF PROPERTY (Refer to Pro	operty Records):			
Address:	S	T	R	
Subdivision Name:	Tract No(s).	Lot No(s)	Block No	
Zoning District in Which Use is Proposed (Example: R	ural Whitefish 2	Zoning District):		
Zoning (Site Plan Review Applies to the Following):  BS Business Service District BR-4 Resort Business I-1H Light-Industrial - Highway (including landscape p WV West Valley (neighborhood convenience store only HO Highway Overlay				
Existing Structures on the Site:				
Nature of Proposed Work:				

Proje	ect Information: (Maps and drawing	ngs must be	attached. See	Pages 3 and 4 for directions)
A.	Is Vicinity Plan Attached?	□ Yes	$\square$ No	
B.	Is Site Plan Attached?	□ Yes	□ No	
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other comp with t appro	submitted forms, documents, plan lete, and accurate to the best of m this application be incorrect or un appriate action taken. The signing of	ns or any ot y knowledge true, I unde of this applic	ther information e. Should any erstand that an cation signifies	of Montana that the information submitted herein, on a ion submitted as a part of this application, to be true y information or representation submitted in connection ny approval based thereon may be rescinded and othe es approval for the Flathead County Planning & Zoning pection during the approval and development process.
Own	er(s) Signature (all owners must	t sign)		Date
Appl	icant Signature (if different than	ı above)		Date

Updated 12/13/21

### GUIDELINES FOR PREPARING VICINITY MAP AND SITE PLAN

#### A. Site Plan

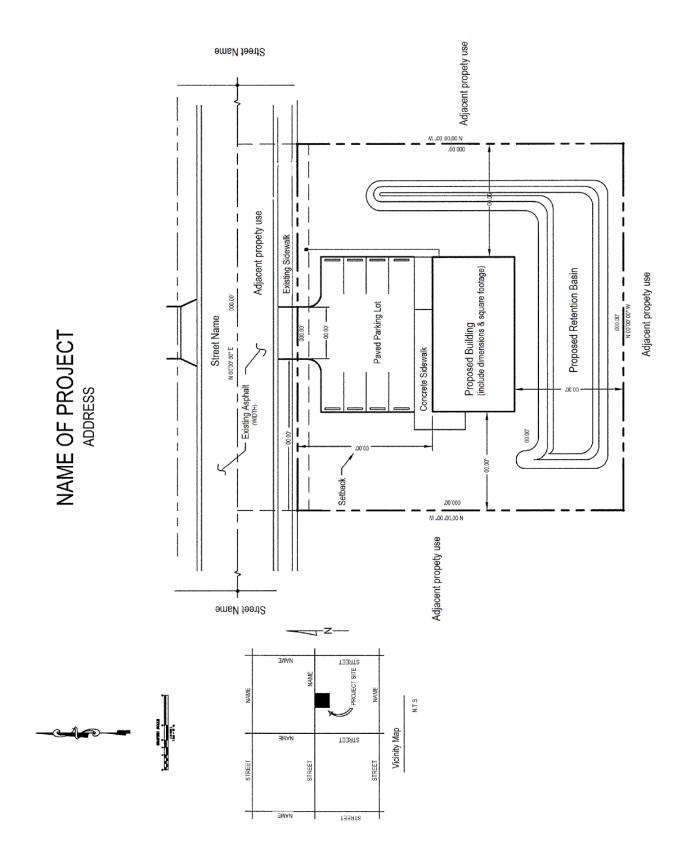
The purpose of a site plan is to show the location of the project in relation to any existing structures/facilities on the lot, to the property line, the right-of-way and compliance with the regulations. The site plan shall clearly show the following:

- 1. Street name, driveway, sidewalk, landscaping
- 2. Drawing scale, north arrow
- 3. Lot dimensions, property lines
- 4. On-site water system (septic or well systems, if any)
- 5. Label and locate existing buildings and other physical structures
- 6. Label and locate proposed buildings additions, retaining walls and other physical structures
- 7. Setback distances to property
- The site plan shall demonstrate conformance with the zoning regulations and other applicable county regulations. All projects constructed in accordance with an approved site plan shall be maintained as approved;
- 9. Location of proposed landscaping drawn to scale, which scale shall be appropriate to the size of the project (I-1H and WVO only).
- 10. Within WVO zoning the following is required;
  - i. Location, size, type and condition of proposed vegetation and natural or manmade materials, including benches, walks, plaza, lighting, etc.
  - ii. Irrigation system.
  - iii. Description of the proposed maintenance plan.
  - iv. Estimated date of completion of the installation of plantings and finish materials.

#### B. Vicinity Map

The purpose of the vicinity map is to identify the location of the property and to show surrounding development. The map shall clearly show the following;

- 1. The location of the proposed site in relation to the nearest roads, highways and other landmarks;
- 2. The vicinity map shall include surrounding parcels, buildings, structures, and major physical features.
- 3. North point and map scale.





40 11th Street West, Ste. 220 Kalispell, MT, 59901

OFFICE: (406) 751-8200

**EMAIL:** planning.zoning@flathead.mt.gov **WEB:** 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.

Dlagge Check og Annyonvictor					
Please Check as Appropriate:	Strongly Agree	Agree	Disagree	Strongly Disagree	No Comment
Staff was courteous and helpful					
Staff provided accurate information to me					
Staff response was considerate of my time					
My overall experience was positive					
Please complete the section below if	your contac	ct with u	s involved p	ermitting:	
The permitting process was understandable					
The regulations were understandable					
Application instructions were understandable					
Terms and conditions of the permit were understandable					

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:
As a result of your experience with us, what service-related improvement(s) can you recommend?
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 Phone: (406) 751-8200