

Flathead County

Planning & Zoning

40 11th Street West, Suite 220 Kalispell, MT 59901
Telephone 406.751.8200 Fax 406.751.8210

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 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 _____

Zoning District in Which Use is Proposed (Example: *Rural Whitefish Zoning District*):

Zoning (Site Plan Review Applies to the Following):

- BSD Business Service District
- BR-4 Resort Business
- I-1H Light-Industrial - Highway (including landscape plan)
- WV West Valley (neighborhood convenience store only)
- SWO South Whitefish Overlay

Existing Structures on the Site:

Nature of Proposed Work:

Project Information: (Maps and drawings must be attached. See Pages 3 and 4 for directions)

- A. Is Vicinity Plan Attached? Yes No
- B. Is Site Plan Attached? Yes No

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in connection with this application be incorrect or untrue, I understand that any approval based thereon may be rescinded and other appropriate action taken.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

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
8. 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.

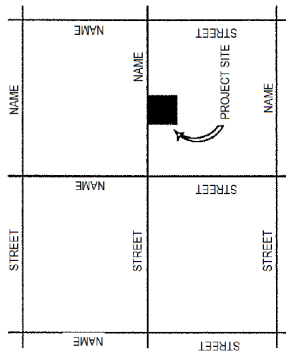
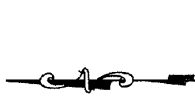
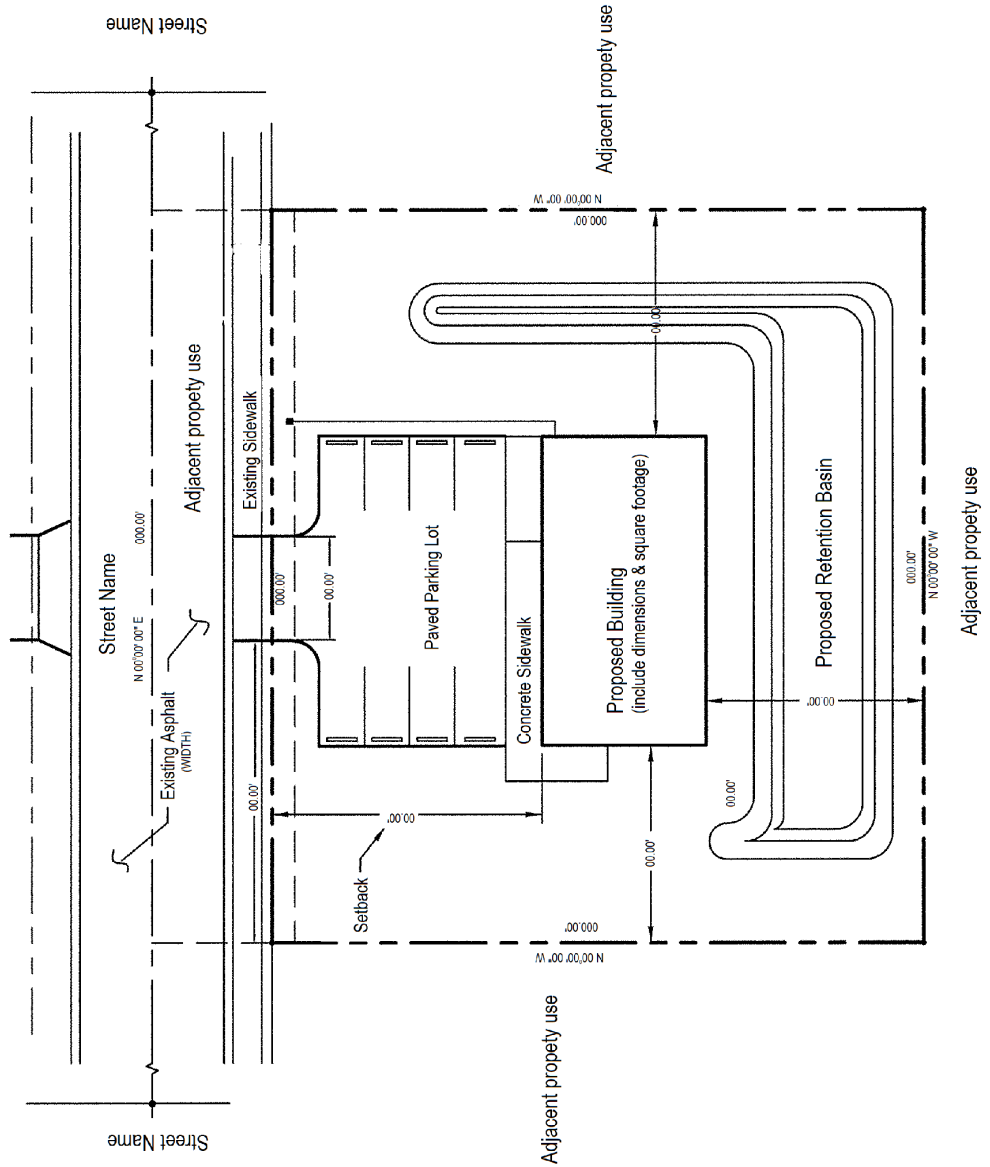
B. Vicinity Map

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.

Site Plan and Vicinity Map Example

NAME OF PROJECT
ADDRESS



Vicinity Map
N.T.S.



40 11th Street West, Ste. 220
 Kalispell, MT, 59901
OFFICE: (406) 751-8200
FAX: (406) 751-8210
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.

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 _____

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 contact with us involved permitting:					
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:

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 11th Street West, Suite 220
Kalispell, MT 59901
Email: Planning.Zoning@flathead.mt.gov
Phone: (406) 751-8200
Fax: (406) 751-8210