



PAYSON CITY – Development Services

439 W Utah Avenue, Payson UT 84651

Phone: 801-465-5204 www.paysonutah.org

ZONING VERIFICATION

For Office Use Only:	Review Fee (15-1)	\$25.00
Application # _____	Application Date _____	Staff Review Date _____
Action: Zone Verified <input type="checkbox"/>	Zone Verified – Conditions Attached <input type="checkbox"/>	Certificate of Nonconformity <input type="checkbox"/>

Project Address: _____

Utah County Parcel No(s): _____

Total Acreage: _____ Current Zone: _____

Current Use of Property: _____

Intended Use of Property: _____

Property Owner Name: _____

Address: _____

Telephone: _____ Email: _____

Property Owner Signature: _____ Date: _____

Authorized Representative Contact Information: (Per the owner’s signature and by indicating an authorized representative, all communication from the city will be directed to the authorized representative.)

Name: _____

Company Name: _____

Address: _____

Telephone: _____ Email: _____

SUBMITTAL CHECKLIST (applicant – please ensure all items are included in this submittal)

	Site plan drawing (does not have to be to scale) that illustrates dimensions and locations of any existing structures on the property with dimensions and setbacks noted and showing all existing driveways and parking stalls associated with the property.
	Any other information that may be helpful in researching the use of the property

I certify that this application and all the information submitted as a part of this application is true, complete, and accurate to the best of my knowledge. I acknowledge that I have reviewed the applicable sections of the Payson City Municipal Code, that items and checklists contained in this application are basic and minimum requirements only, and that other requirements may be imposed that are unique to individual projects or uses. I agree to comply with any and all applicable laws, ordinances, and resolutions in effect at this time. Should any of the information or representations submitted in connection with this application be incorrect or untrue, I understand that Payson City may rescind any approval or take any other legal or appropriate action. I also agree to allow the staff, planning commission, city council, or appointed agents of the city to enter the subject property to make any necessary inspections thereof.

Signature Authorized Agent/Owner (if no agent):

Date: _____

NOTE:

1. Applications will not be accepted without ALL the required submittal materials. The city will not hold partial submittals.
2. Acceptance of this submittal for review is not an acknowledgement by the city of a complete application.

ADDITIONAL INFORMATION (Links)

Payson City Code, Title 19, Zoning Ordinance - http://www.paysonutah.org/img/File/CityCode/Zoning_Adopted%201-6-16.pdf

Payson City Code, Title 19 Appendix A - http://www.paysonutah.org/img/File/CityCode/Appendix%20A_Adopted%207-1-15.pdf

Payson City Planning and Zoning Page - <https://paysonutah.org/departments/development-services/planning-and-zoning>