

Application for Zoning Approval City of Colstrip

Location: _____

Owner: _____

Type of Improvement:

- | | |
|---|---|
| <input type="checkbox"/> 1. New Building | <input type="checkbox"/> 2. Addition |
| <input type="checkbox"/> 3. Alteration | <input type="checkbox"/> 4. Repair or replacement |
| <input type="checkbox"/> 5. Wrecking | <input type="checkbox"/> 6. Moving |
| <input type="checkbox"/> 7. Propane Tank | <input type="checkbox"/> 8. Sign |
| <input type="checkbox"/> 9. Portable Garage | <input type="checkbox"/> 10. Other _____ |

Ownership:

1. Private 2. Corporation 3. Federal, State, Public

Proposed Use:

1. One Family
2. Two or more Families (Number of Units) _____
3. Transient, Hotel, Motel (Number of Units) _____
4. Garage or Carport
5. Mobile Home
6. Other _____

Principal Type of Structure:

- | | |
|--|---|
| <input type="checkbox"/> 1. Masonry | <input type="checkbox"/> 2. Wood Frame |
| <input type="checkbox"/> 3. Structural Steel | <input type="checkbox"/> 4. Reinforced Concrete |
| <input type="checkbox"/> 5. Other _____ | |

Sewage Connection needed: yes no

Water Connection needed: yes no

Name	Mailing Address	Phone
1. Owner		
2. Contractor		
3. Architect		

Draw a diagram of the lot that shows the placement of existing structures and the proposed change requested. Include the names of adjacent streets and intersections. The distance from each property line to the proposed building, sign, or propane tank will need to be clearly indicated as well as the distance from existing buildings.

District _____ Setbacks: Front _____ Side _____ Rear _____

The Owner of this building and the undersigned agree to conform to Zoning and Building Codes for the City of Colstrip.

Signature of Applicant

Address

Date
