River Heights City Conditional Use Application

For office use

Date Received: 121123

Hearing Date: 19124

Amount Paid: 9

Approved _____ Denied ____

	Approved _	Denied
APPLICANT		
Name: River Heights City		
Mailing Address: 520 South 500 East		
Phone: 435, 752. 2646 email: Office@	riverheights	.org
Please check one of the following: buyer	renter	_agentother
PROJECT INFORMATION		
Name: Lower Well Renovation		
Address/Location: 400 East Riverdale Rd.		
Property Tax ID: 02-015-0029	Existing Zone:	R12
What is the current use of the property? River Heights	Mel	
How many employees will be working at this location including		te family, and non-
family members?		
How many vehicles will be coming and going daily, weekly, or	monthly? One pe	er day or less
I agree to abide by the River Heights City Parking Ordinance (1		
I agree to abide by the River Heights City Sign Ordinance (10-1		
Description of Request: Request for upgrade of 1	River Heights (City's well and
structure, landscape		
SUBMITTAL REQUIREMENTS		
Completed and signed application form		
N × \$100 application fee		
8 ½ x 11 copy of plans		
Provide a Fire Protection evaluation from the fire depart	artment.	

ACKNOWLEDGMENT OF RESPONSIBILITY

Signature of Applicant(s)

I certify that I am making an application for the described action to the City and that I am responsible for complying with all City requirements in regard to this request. I realize in order to do any construction on the property, I will be required to obtain a Zoning Clearance Permit from River Heights City and possibly a County Building Permit. I also agree to meet the ordinances and standards of River Heights City for any improvements. The documents and/or information I have submitted are true and correct. I understand that my application is not deemed complete until the Planning Commission has reviewed the application and has given their approval in the form of a permit. I understand additional fees may be charged for the City's review of the proposal (including, but not limited to, engineering and attorney fees). I agree to reimburse River Heights City for any costs of enforcement including reasonable attorney fees, and/or any other costs of enforcement incurred by the City resulting from my failure to comply with the Land Use Ordinance and terms of this Conditional Use Permit.

Sign for River Heights City	Janet G. Mathews
12/21/2023 Date	
Sign	Print
Date	
AFFIRMATION OF SUFFICIENT INTEREST	
I hereby affirm I am the fee title owner of the abortrom the owner to pursue the described action with	ve described property or I have written authorization that a copy of the authorization attached.
Sign	Date



