Planning Application

Property Owner Signature & Submittal Requirements Form

Conditional Use

A pre-submittal meeting is required. All submittal items are required unless indicated otherwise by staff. To be considered complete, this checklist must accompany all of the materials listed below, in a PDF format. Failure to provide required materials will result in a returned application at which point processing will be delayed.

Submittal Item	Staff Use Only
Property Owner Signature & Submittal	
Requirements Form	
Proof of Ownership	7,00
Detailed Narrative	
Fire Flow Demand & Availability	
Calculations Form	
Existing Conditions Plan	
Site Plan	
Architectural Drawings	
Traffic Study or Waiver*	
Fire Code Analysis	
Other	
* Preconsultation approval required prior to	submitting a Conditional Use application
ALL Property Owner Signatures R	equired
authorize the applicant to submit this applic departmental review by the City of Steambo	ation and supporting materials for the applicable bat Springs.
Name & Date	Name & Date
Signature	Signature
Applicant Signature Required	
understand that if this application or any of	includes all the required materials to be deemed complete. I the submittal items are incomplete or found to be insufficient, cessed any further. In submitting this application, I affirm and correct.
Name & Date	
Signature	

1 01/2023

PSM ID:



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Other	
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ALL Property Owner Signatures Required	
hereby affirm that I am the lawful owner of the parcel(s) this application is concerning. I further authorize the applicant to submit this application and supporting materials for the applicable departmental review by the City of Steamboat Springs. Krista Sprenger 3/5/2024	
Name & Date —DocuSigned by:	Name & Date

Applicant Signature Required

Signatu4@EB6E453.

I, the applicant, affirm that this application includes all the required materials to be deemed complete. I understand that if this application or any of the submittal items are incomplete or found to be insufficient, this application will be returned and not processed any further. In submitting this application, I affirm that all information contained within is true and correct.

Michael Marchand LaMotte 3/4/2024

Signature

Name & Date
Docusigned by:
Michael Marchand LaMotte

1 01/2023