



CITY OF NORTH SALT LAKE  
COMMUNITY & ECONOMIC DEVELOPMENT

10 East Center Street, North Salt Lake, Utah 84054  
(801) 335-8700  
(801) 335-8719 Fax

**CODE AMENDMENT**  
APPLICATION

*For Office Use Only*

|                                 |                               |
|---------------------------------|-------------------------------|
| Application #: _____            | Fee: _____                    |
| Date Received: _____            | Paid: _____                   |
| Pre-Application Date: _____     | Parcel ID: _____              |
| Project Planner: _____          | Code Section: _____           |
| Proposed Change: _____          |                               |
| Planning Commission Date: _____ | Approved: _____ Denied: _____ |
| City Council Date: _____        | Approved: _____ Denied: _____ |

**Project Name:** \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**Applicant Name:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**Representative Name:** \_\_\_\_\_

Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

*If you have any questions about this application, please contact the  
Community Development Department at (801) 335-8700.*

*(Revised 12.14.2015)*

# ADDITIONAL INFORMATION

*(attach addition sheets if needed)*

1. Please provide and explain the existing language proposed for modification:

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2. Please provide the proposed language change

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3. Identify any impacts and/or conflicts with other codes or the General Plan, along with proposed impact mitigation. Demonstrate how the amendment will conform to the General Plan.

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## **Notice to All Applicants**

**Application Deadline:** Minimum 3 weeks prior to desired Planning Commission Meeting

*Meeting this deadline does not guarantee placement on the Planning Commission agenda, which will be determined by completeness of application, conformance to required standards, and staff work load. Every effort will be made to process applications in a timely manner.*

### **APPLICATION REQUIREMENTS**

- Complete and signed application form
- A non-refundable code amendment application fee
- Description of the change desired and the reasons therefore
- Stamped and addressed envelopes (*return address blank*)
  - All affected entities
  - Affected Property owners
- List of all affected entities and property owners

## ACKNOWLEDGEMENT OF RESPONSIBILITY

This is to certify that I am making an application for the described action by the City and that I am responsible for complying with all City requirements with regard to this request. This application should be processed in my name and I am a party whom the City should contact regarding any matter pertaining to this application.

I have read and understood the instructions supplied by North Salt Lake City for processing this application. The documents and/or information I have submitted are true and correct to the best of my knowledge. I understand that my application is not deemed complete until a Project Planner has reviewed the application and has notified me that it has been deemed complete.

I will keep myself informed of the deadlines for submission of material and the progress of this application. I understand that a staff report will be made available for my review three days prior to any public hearings or public meetings. This report will be on file and available at the Community Development Department.

I further understand that additional fees may be charged for the City's review of the proposal. Any additional analysis required would be processed through the City's consultants with an estimate of time/expense provided prior to an authorization with the study.

Signature of Applicant: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Type of Application: \_\_\_\_\_

\_\_\_\_\_

## AFFIRMATION OF SUFFICIENT INTEREST

I hereby affirm that I am the fee title owner of the below described property or that I have written authorization from the owner to pursue the described action. I further affirm that I am aware of the City policy that no application will be accepted nor work performed for properties that are tax delinquent.

Name of Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Street Address/Legal Description of Subject Property:

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

1. If you are not the fee owner attach a copy of your authorization to pursue this action provided by the fee owner.
2. If a corporation is fee titleholder, attach copy of the resolution of the Board of Directors authorizing the action.
3. If a joint venture or partnership is the fee owner, attach a copy of agreement authorizing this action on behalf of the joint venture or partnership.
4. If a Home Owner's Association is the applicant then the representative/president must attach a notarized letter stating they have notified the owners of the proposed application. A vote should be taken prior to the submittal and a statement of the outcome provided to the City along with the statement that the vote meets the requirements set forth in the CCRs.

Please note that this affirmation is not submitted in lieu of sufficient title evidence. You will be required to submit a title opinion, certificate of title, or title insurance policy showing your interest in the property prior to Final Action.