



SYRACUSE CITY BUILDING PERMIT APPLICATION

Syracuse City Building Department - 1979 W 1900 S - Syracuse, Utah 84075 - Telephone 801-614-9670

Date of Application		Date Work to Begin		Receipt No.	Date Issued	Permit No. SYR	
Proposed Use				Building Fee Schedule			
Bldg. Address				Sq. Ft. of Building:		Valuation: \$	
Assessors Parcel No.				Rough Basement:		Building Fee	
Lot No.				Finished Basement:		Plan Check Fee	
Subdivision/Phase#				Carport Sq. Ft.:		Sec. Conn.	
Total Property Area - In sq. ft.				Garage Sq. Ft.:		Sec. Impact	
Total Bldg. Site Area Used				Type of Bldg.	Occ. Group	Water Impact	
Owner				No. of Bldgs.		R - Values	
Address				No. of Stories		Water Conn.	
City Zip Phone				No. of Bedrooms		Sewer Conn.	
Email				No. of Bathrooms		Storm Sewer Impact	
Tenant/Business Name Business License No.				No. of Dwellings		Traffic Impact	
Architect/Engineer				Type of Construction		State Fee	
License Phone				Frame Brick Var. Concrete		Constr. Meter	
General Contractor				Brick Block Steel		Public Safety Fee	
Address				Max. Occ. Load		NDSD Impact	
City Zip Phone				Sq. Ft. Porch/Patio		Garbage	
Email				Brick Design Yes No		Other	
Electrical Contractor				U Factor Window		Other	
License				Fire Sprinkler Yes No		Fire Alarm Yes No	
Address						TOTAL	
City Zip Phone							
Email							
Plumbing Contractor							
License							
Address							
City Zip Phone							
Email							
Mechanical Contractor				If any person takes occupancy prior to receiving 'Certificate of Occupancy' document from Syracuse City, the Contractor/Permit Signee will be cited with a Class B misdemeanor according to the adopted ordinance.			
License				Comments:			
Address				Plan Check by:			
City Zip Phone				Signature of Approval			
Email				Date			
Previous Usage of Land or Structure (past 3 years)				This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not the granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction and that I make this statement under penalty of perjury. *This permit does not become a permit until signed below*			
Dwell. Units Now on Lot:		Accessory Buildings Now on Lot:					
Type of Improvement/Kind of Construction							
Sign	Build	Remodel	Addition				
Repair	Move	Convert Use	Demolish				
No. of Offstreet Parking Spaces: Covered:		Uncovered:					
SUB-CHECK				Plot Plan			
Zone: _____ Approved by: _____							
Disapproved Approved							
Sub-Check by: _____							
Date: _____							
Minimum Setbacks in Feet							
Front	Side	Side	Rear				
Signature of Contractor or Authorized Agent				Date			
Signature of Owner (if owner)				Date			
Census Tract				Traffic Zone			
Certificate of Occupancy							

NOTE: 24 hour notice is required for ALL Inspections



Conditional Use Permit

Syracuse City Community & Economic Development
1979 West 1900 South, Syracuse, UT 84075
801-825-1477 opt.4 • www.syracuseut.com • planning@syracuseut.com

For Office Use Only

Permit # _____

Permit Type: **Conditional uses are not limited to the following options* Updated 3-9-2016

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Accessory Structure | <input type="checkbox"/> Daycare | <input type="checkbox"/> Model Home | <input type="checkbox"/> Two-Family Dwelling |
| <input type="checkbox"/> Apiary | <input type="checkbox"/> Dog Kennel | <input type="checkbox"/> Preschool | <input type="checkbox"/> Wireless Communication |
| <input type="checkbox"/> Cluster Subdivision | <input type="checkbox"/> Home Occupation | <input type="checkbox"/> Temporary Commercial Use | <input type="checkbox"/> Other: _____ |

Subject Property Location

Address:			Business or Subdivision Name (if applicable):		
Primary Structure Square Footage:	Lot Size (acres):	Current Zone:	Number of Dogs Currently on Site:	Number of Accessory Uses Currently on Site:	Present Use of Land:
Structure or Use Square Footage:					

Applicant Contact Information

Name:		Mailing Address (if different from subject property location):			
Phone Number(s):		City:	State:	ZIP:	
Email Address:		Relationship to Property Owner			

Property Owner Information (write 'S/A' if same as above)

Name(s):		Mailing Address (if different from subject property location):			
Phone Number (s):		City:	State:	ZIP:	
Email Address:					

Description of Requested Use

I hereby certify that the requested Conditional Use would comply with all required conditions and standards of the Syracuse Land Use Ordinance, be harmonious with neighboring uses, fit the goals of the City's General Plan, and impose no insatiable demands for public services. I read the City Land Use Ordinance relative to Conditional Uses and understand that submitting this application does not guarantee approval and is subject to the discretion of the City Land Use Authority and compliance with all requirements of Syracuse City Title X. I hereby accept responsibility for meeting all requirements outlined herein, including payment of all fees and attending City Land Use Authority meetings as notified by the Community Development Department, and understand that failure to do so may result in postponement of action by said Authority. I also understand that approval shall not relieve me of the responsibility to comply with applicable local and State zoning, health, building, or fire regulations.

_____ Business/Property Owner Signature	Date	_____ Applicant Signature	Date
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FOR OFFICE USE ONLY					
Application & Noticing Fees:			Conditions of Approval:		
\$100	Application Fee				\$
\$ 50	Extension/Modification				\$
\$ 6	Public Notice Sign				\$
\$ 1	Per Mailing Notice	_____ Notices			\$
Total				\$	
Paid:	Received by:	Receipt #:			
Payment Type: <input type="checkbox"/> Cash <input type="checkbox"/> Credit Card <input type="checkbox"/> Check#_____			Approved:_____ Date:_____		

Conditional Use Permits are not valid until application fees are submitted and Conditional Use(s) are approved and signed by Planning Department staff, once approved a copy will be provided to the applicant.

Applicant to read and check each box to acknowledge an understanding of all requirements:

- Complete and sign Conditional Use Permit application form
- Pay application and any applicable noticing or mailing-list generation fees
- Submit mailing list, if a major conditional use. The applicant must obtain a notification list of all owners of real property located within 300 feet of the subject property boundary from the Davis County Recorder's office located at 61 S Main Street, Farmington 84025. Please have the Excel file format list emailed directly to planning@syracuseut.com.
- Provide scaled drawings of site plan and any other applicable drawings
- Acquire an approved Building Permit after conditional use approval, if applicable

Scaled Drawings

Site plans shall be drawn to not less than 1 inch equaling 40 feet and include the following, when applicable:

- Name, address, and phone number** of property owner as well as engineer or agent
- Boundaries and dimensions of property**, with adjacent **public street(s)** identified, and measurements of **setbacks** and **distances** between, and **dimensions** of, existing and proposed structures on site as well as existing structures, 200 square feet or greater, within 50 feet on adjacent properties
- Easements**, existing and proposed.
- Required landscaping, open space, or park space**
- Off-street parking**-location, layout and number of stalls
- Fences or walls**-location and height

In addition to the required Site Plan, some conditional use applications require the following information:

Accessory Structures:

- Elevation drawing that shows exterior materials/color of design finish for both proposed structure and home, roof structure and its height from top of wall plate to peak, and measurement(s) of wall height(s); square footage of rear yard (width x depth from back of home to rear property line); and proposed use of structure.
- Approvals from utility companies to encroach into recorded public utility easement, if applicable

Apiary:

- Location and number of hives and the dedicated water source.
- Flyways if any colony is situated within 25 feet of any property line and the yard is not contained with a 6' solid fence.

Cluster Subdivision:

- Home Owners Association bylaws for maintaining open space, landscaping plan, and building-design standards

Daycare:

- Proposed number of children at the residence
- Provide proof of licensure from the Utah Department of Health, Bureau of Licensing, obtain a Syracuse City Business License.
- Provide a criminal background clearance for all employees and persons residing in the home age 18 or older.
- Floor Area-include location and dimensions of proposed use and applicable storage.

Dog Kennel:

- Provide proof of licensing for each dog from Davis County Animal Control
- Location of all pens, runs, shelters, or similar structures housing dogs.
- Location of all neighboring or abutting dwellings

Home Occupation:

- Please refer to the Home Occupation Compliance Standards and Agreement

Model Home:

- Exterior lighting plan indicating location, direction and timing of all lighting on the site.
- Signage plan indicating the size and location of all signs, flags and banners.
- Hours of Operation

Preschool:

- Proposed number of children and sessions per week
- Floor Area-include location and dimensions of proposed use and applicable storage.

Temporary Commercial Uses:

- Identification of all lots owned by applicant within subject subdivision
- Proposed signage in accordance with Syracuse City Sign Ordinance Regulations
- Written authorization from property owner
- Explanation of sanitary facilities
- Bonding/Insurance requirements

Two-Family Dwellings:

- Elevation drawings showing type of material and design finish of proposed home

Wireless Communication:

- Please refer to the Syracuse City Code for specific requirements.

DISCLAIMER: *The City is providing the following information as a service to those applying for conditional use approvals. No one shall consider these guidelines as comprehensive. In the event of conflicts or discrepancies between this document and City Ordinances or State or Building Codes, the more strict rules shall apply.*

NOTE: *Applicant shall furnish the information on this form for purposes of identification and expediting the request in full knowledge that it may become public record pursuant to provisions of the Utah State Government Records Access and Management Act (GRAMA). Use of this information will be only for necessary completion and execution of the requested transaction. If applicant so chooses not to supply any requested information, applicant accepts the additional time in processing or inability to process the application at all. If applicant is an "at-risk government employee" as defined in Utah Code Ann. § 63-2-302.5, please inform a member of the Department staff upon submission of the application. Syracuse City does not currently share any private, controlled, or protected information with any other person or government entity. See Title X for complete guidelines and requirements of Conditional Uses. City staff will not process, or forward to Planning Commission, incomplete applications.*