

APPLICATION FOR APPEAL OR AMENDMENT
City of Caldwell Planning and Zoning Department
621 E. Cleveland Blvd., Caldwell, ID 83605
Phone: (208) 455-3021

PROPERTY OWNER: _____ PHONE: _____

PROPERTY OWNER ADDRESS: _____ City, State, Zip: _____

*PROPERTY OWNER EMAIL: _____
(*Requested so we may email the property owner our Staff Report)

DEVELOPER NAME: _____ PHONE: _____

DEVELOPER ADDRESS: _____ City, State, Zip: _____

*DEVELOPER EMAIL: _____
(*Requested so we may email the developer our Staff Report)

ENG/SURV/PLANNER NAME: _____ PHONE: _____

ENG/SURV/PLANNER ADDRESS: _____ City, State, Zip: _____

*ENG/SURV/PLANNER EMAIL: _____
(*Requested so we may email the engineer/surv/planner our Staff Report)

SITE PARCEL #: R _____
(The R number is the tax ID number and is obtained from the county assessor's office)

SITE ADDRESS: _____

PLEASE SELECT ONE FROM EITHER #1, 2 OR 3:

1. APPEALING A CASE DECISION:

CASE NAME BEING APPEALED: _____

- DECISION WAS RENDERED BY: ___ Planning and Zoning Commission
 ___ Hearing Examiner
 ___ Historic Preservation Commission
 ___ Design Review Commission
 ___ Planning and Zoning Director Administrative Determination
 ___ Landscaping Plan Design Review Commission

DATE OF SIGNATURE ON ORDER OF DECISION: _____
(Applications for Appeal must be received by the City within 15 days of the date of signature on the Order of Decision.)

2. APPEALING A NON-COMPLIANCE/INTENT TO REVOKE ORDER: (Please check one)

Notice of Non-Compliance/Intent to Revoke Special Use Permit Approval

Notice of Non-compliance/Intent to Revoke Home Occupation Permit

Notice of Order to remove non-compliant Accessory Use or Fence

Date of Notice of Non-Compliance/Intent to Revoke or Notice of Order to remove: _____
(Applications for Appeal must be received by the City Clerk within 7 days of receipt of the Notice.)

3. REQUESTING AN AMENDMENT: (Please check one)

CASE NAME BEING AMENDED: _____

REQUESTING AN AMENDMENT OF: Development Agreement

Condition(s) of Approval from Order of Decision

Both Development Agreement and Condition(s) of Approval

Please list the item number(s) from the Development Agreement for which an amendment is being requested.

Please list the item number(s) from the conditions of approval in the Order of Decision for which an amendment is being requested.

The following attachments MUST accompany this application or the application will not be accepted:

Developer
Initials

Staff
Verified

- | | | |
|-------|-------|--|
| _____ | _____ | 1. Written explanation of the reason for requesting an appeal OR, in the case of an amendment, please explain in detail the reason for requesting the amendment as well as outlining a preferred alternative. |
| _____ | _____ | 2. List of property owners within 300' of the site with names, addresses and ID numbers (obtained from the Canyon County Plat Room on the 3rd floor of the county courthouse). |
| _____ | _____ | 3. 50% reduced copy of the assessor's plat map for the entire section, township, range that the site sits in (must be obtained from the Canyon County Plat Room on the 3rd floor of the county courthouse) |
| _____ | _____ | 4. Application Fee (checks payable to City of Caldwell. Please ask the Senior Planner for the correct application fee). |

I understand this application shall not be considered complete (nor shall a hearing date be scheduled) until all required information has been submitted and said information has been verified by the Senior Planner. All the information, statements, attachments and exhibits transmitted with this application are true to the best of my knowledge.

PROPERTY OWNER SIGNATURE _____ DATE _____

DEVELOPER SIGNATURE _____ DATE _____

ENG/SURV/PLANNER SIGNATURE _____ DATE _____

FOR OFFICE USE ONLY

Date Received: _____

Received by: _____