

City of Hailey – Text Amendment Application

Submittal Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_

Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Fax: : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Cell: : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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

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

Name of individual to contact on behalf of Trust or LLC (if applicable): \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_

Phone: : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Fax: : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Cell: : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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

Application Contact (if different than above): \_\_\_\_\_

*\*\*Application Contact will be the Planning Department’s primary point of contact for questions related to the application.*

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_

Phone: : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Fax: : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Cell: : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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

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

Ordinance to be amended:  Subdivision  Zoning  Comprehensive Plan

Section title and number to be amended: \_\_\_\_\_

Fees: Cost of additional noticing, recording fees, and other direct costs will also be assessed. ***FOR CITY USE ONLY***

Application.....	\$ 400.00
Publication cost (\$40.00 x 2).....	\$ 80.00
Mailing (45 [public agencies] x 2) x (postage____ + .15 for paper, envelope & label)	\$ _____
<b>DO NOT COUNT DUPLICATES OR CITY OF HAILEY</b>	
Total Due.....	\$ _____

The following items must be submitted with the application for the application to be considered complete (✓):

- \_\_\_\_\_ The new language proposed for the section to be amended.
- \_\_\_\_\_ A written explanation and summary of the specific objective of the proposed amendment.
- \_\_\_\_\_ An analysis of any related Goals or Policies of the Comprehensive Plan, citing sections, that may support or address the proposed amendment.
- \_\_\_\_\_ PDF files of all required documents
- \_\_\_\_\_ Names and address of all property owners within three hundred (300) feet of the exterior boundaries of the land being considered. Submit paper copy and electronically on formatted spreadsheet. Names and addresses can be obtained using the Blaine County map server <http://maps.co.blaine.id.us/> or from the Blaine County Assessor’s office. Assistance can be provided by the Hailey Planning staff upon request.
- \_\_\_\_\_ Other information as requested by the Planner:

City Use Only –  
Certified Compete by: \_\_\_\_\_  
Date: \_\_\_\_/\_\_\_\_/\_\_\_\_