



Title 10 – Land Use Ordinance Text Amendment Application

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:

Received: _____

PC Hearing: _____

Council Hearing: _____

Applicant Contact Information:

Updated: 3/2017

Name:	Business Name:		
Phone Number(s):	Mailing Address: (If different from subject property location)		
E-Mail Address:	City:	State:	Zip Code:

Relationship to Property Owner:

Property Owner Information: *(If this information is the same as above, please write 'S/A')*

Name(s):	Mailing Address: (If different from subject property location)		
Phone Number(s):	City:	State:	Zip Code:

Email Address:

Section(s) Of Syracuse City Code To Be Amended: *(Please attach a separate sheet if necessary)*

Current Provision(s) Of Text To Be Affected By Proposed Amendment: *(Please attach a separate sheet if necessary)*

Proposed Wording Of Text Change: *(Please attach a separate sheet if necessary)*

I hereby certify that the requested Text Amendment 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 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.

Applicant Signature

Date

Business/Property Owner Signature

Date

FOR OFFICE USE ONLY

Date Received and Paid:	Received By:	Receipt #	Application and Noticing Fees:
			\$200 Application Fee \$200.00
Payment Type: <input type="checkbox"/> Cash <input type="checkbox"/> Credit Card <input type="checkbox"/> Check# _____			
Land Use Authority Date:			
City Council Decision and Date:			Total \$200.00

Proposed Text Amendment(s) are not valid until application fees are submitted and the proposed text amendment(s) are approved by City Council. Once approved a copy will be provided to the applicant.