Cascade County Special Use Permit Application

Cascade County Planning & GIS Department
121 4th St N, Suite 2H/I
Great Falls, MT 59401
Phone: 406-454-6905 Fax: 406-454-6919

Permit No:_____
App. No.: _____
Applied Date:_____

General Information

A Special Use Permit (SUP) is required for uses in which conformance to additional standards will be required due to characteristics that are unique and special to the use. SUPs are to be issued for one specific use and are required for each tract of land. Legally issued SUPs shall expire one year after the date of approval if construction, or the use permitted, has not started. A one-time only six (6) month extension may be granted by the Zoning Board of Adjustment (ZBOA) upon request. SUP applications require a non-refundable application fee of five hundred dollars ($500.00). If a SUP is applied for after the fact or construction/use starts before a permit is issued, then a non-refundable Application fee of seven hundred and twenty-five dollars ($725.00) is required. Each SUP application shall be accompanied by a Location/Conformance (L/C) Permit application for changes in use and/or structures associated with the SUP application. The L/C Permit application fee **is included in** the SUP application fee.

Application Information

Property Owner Name: _____

Applicant Name: _____

Application Type: ☐ Change of Use ☐ New Structure(s)

Special Use Call Out: _____

Understanding the Regulations

The proposed use must be specifically mentioned as a category in *Uses Permitted Upon Issuance of a Special Use Permit* within Section 7 of the Cascade County Zoning Regulations. Portions of the County Zoning Map and the Zoning Regulations are available at the Cascade County Website at https://www.cascadecountymt.gov/245/Planning.

Steps of the Application Process

(1) Schedule a Pre-Application meeting with planners to ensure the project will meet the standards for Special Use Permits as outlined within Section 7 of Cascade County's Zoning Regulations.

(2) Complete, sign and submit a Special Use Permit application, Location/Conformance Permit application and a Use Statement Form, with the $500.00 non-refundable application fee to Planning Staff.

(3) Diagrams, business plans, photographs and other documents may be requested as part of a complete application, depending on the applicant's proposal.

(4) Planning Staff will notify interested agencies of the proposed project to request comments for the application.

(5) Planning Staff will schedule a public hearing before the *Cascade County Zoning Board of Adjustment*;

(6) Legal notice will be published twice in the Great Falls Tribune with at least six (6) days separating each publication.

(7) Notice will be sent to all adjacent landowners via certified mail.

(8) Planning Staff will present the application to the Zoning Board of Adjustment along with recommendations, based on findings of facts.

(9) The *Zoning Board of Adjustment* will make a determination on the application; three (3) affirmative votes are needed to issue the permit.

(10) Upon written notice from the Planning Staff, the applicant may begin the permitted special use.

(11) Permits may be revoked or expire for the following reasons:

a. The *Zoning Board of Adjustment* finds them in violation of the conditions of the permit or another regulation/ordinance.

b. Approval is valid for one particular use and shall expire one year after the date of approval, if construction or the use has not started. The Zoning Administrator may grant a one-time only 6 month extension on the Zoning Board of Adjustment Approval.

c. The Special Use Permit shall expire if the use ceases for six (6) months for any reason. Any future extension requests must be granted by the Zoning Board of Adjustment prior to the date of expiration.

SUP General Impacts Criteria

Explain how the proposed use contributes to, hinders, or otherwise impacts each of the criteria below. All criteria must be discussed. If criteria are not applicable, please explain why. Attach drawings, additional text, site plans, and any other documents that will assist staff and the board in reviewing the proposed use. The more information you can provide, the easier it is for staff and the *Zoning Board of Adjustment* to review the application.

(1) The proposed development will not materially endanger the public health or safety.

a. Traffic conditions in the vicinity, including the effect of additional traffic on streets and street intersections, and sight lines at street intersections and approaches:

_____
_____
_____

b. Provision of services and utilities, including sewer, water, electrical, telecommunications, garbage collections, and fire protection:

_____
_____
_____

c. Soil erosion, sedimentation, and stormwater run-off:

_____
_____
_____

d. Protection of public, community, or private water supplies, including possible adverse effects on surface waters or ground water:

_____
_____
_____

(2) The proposed development is a public necessity or will not substantially impact the value of adjoining property.

a. The relationship of the proposed use and the character of development to surrounding uses and development, including possible conflicts between them and how these conflicts will be resolved.

_____
_____
_____

b. Whether the proposed development is so necessary to the public health, safety, and general welfare of the community or County as to justify it regardless of its impact on the value of adjoining property.

_____
_____
_____

(3) The proposed development will be in harmony with the area in which it is located.

a. The relationship of the proposed use and the character of development to surrounding uses and development, including possible conflicts between them and how these conflicts will be resolved.

_____
_____
_____

b. Consistency with the municipal and joint land use plans incorporated by the Growth Policy.

_____
_____
_____

SUP Growth Policy Criteria

Explain how the proposed use will be consistent with each of the Cascade County Growth Policy goal objectives. All objectives must be discussed. If an objective is not applicable, please explain why. The more information you can provide, the easier it is for staff and the Zoning Board of Adjustment to review the application.

Goal 1: Sustain and strengthen the economic well-being of Cascade County's citizens.

Objectives:

A. Stimulate the retention of existing businesses and expansion of existing businesses, new businesses, value-added businesses, wholesale and retail businesses, and industries including agriculture, mining, manufacturing/processing and forest products.

_____
_____
_____

B. Stabilize and diversify the county's tax base by encouraging the sustainable use of its natural resources.

C. Identify and pursue primary business development that complements existing business, which is compatible with communities, and utilizes available assets. Identify and pursue targeted business development opportunities to include, but not limited to, manufacturing/heavy industry, telecommunication, and youth/social services.

D. Promote the development of cultural resources and tourism to broaden Cascade County's economic base.

E. Foster and stimulate well-planned entrepreneurship among the county's citizenry.

F. Promote a strong local business environment. Encourage and strengthen business support mechanisms such as chamber of commerce, development organizations and business roundtable organizations.

G. Improve local trade capture for Cascade County businesses. Promote local shopping as well as well-planned businesses and new businesses.

H. Network with and support other economic development efforts in the region and statewide, in recognition of Cascade County's interdependence with other communities and to leverage available local resources.

I. Encourage the growth of the agricultural economy.

J. Stimulate the growth of the economy by encouraging the use of alternative methods of energy production, including wind energy.

Goal 2: Protect and maintain Cascade County's rural character and the community's historic relationship with natural resource development.

Objectives:

A. Foster the continuance of agriculture and forestry in recognition of their economic contribution and the intrinsic natural beauty of grazing areas, farmlands and forests.

B. Preserve Cascade County's scenic beauty and conserve its forests, rangeland and streams, with their abundant wildlife and good fisheries.

C. Preserve Cascade County's open space setting by encouraging new development to locate near existing towns and rural settlements and by discouraging poorly designed, land subdivisions and commercial development.

D. Assure clean air, clean water, a healthful environment and good community appearance.

E. Support the development of natural resources including but not limited to timber, mining, oil and gas production and renewable energy production.

F. Continue to work with federal and state agencies to redevelop properties within Cascade County which are currently undergoing Superfund and Brownfields processes.

Goal 3: Maintain agricultural economy.

Objectives:

A. Protect the most productive soil types.

B. Continue to protect soils against erosion.

C. Protect the floodplain from non-agricultural development.

D. Support the development of value-added agricultural industry in Cascade County utilizing the products from the regional area.

Goal 4: Retain the presence of the US Military in Cascade County

Objectives:

A. Encourage the federal congressional delegation to actively support maintaining the current mission status at a minimum.

B. Promote the location of additional military missions in Cascade County.

C. Encourage the reactivation of the runway at Malmstrom Air Force Base for fixed wing operations.

D. Refer to the Joint Land Use Study for resolving conflicts and promoting mission compatible development.

Goal 5: Preserve and enhance the rural, friendly and independent lifestyle currently enjoyed by Cascade County's citizens.

Objectives:

A. Maintain Cascade County's citizens independent lifestyle and minimize local governmental intervention, to the extent possible, consistent with the requirements of a continually evolving economy and constantly changing population.

B. Preserve and promote Cascade County's rich cultural heritage, rooted in natural resource development and reflected in its numerous cultural/historic sites and archaeological areas.

C. Promote fire prevention measures throughout the county, giving special emphasis to the extreme fire hazards present at the wildland-urban interface.

_____

_____

_____

D. Encourage the continued development of educational programs and facilities, recreational opportunities and spaces and health services for all county residents.

_____

_____

_____

ATTEST: I hereby certify that the information given herein is true and correct to the best of my knowledge. There are no restrictions placed upon my property which would prohibit the issuance of this permit. If there are any restrictions, then this permit shall become null and void. I hereby grant permission to any Cascade County Zoning Official to enter my property to inspect for compliance with the County Zoning Regulations in relation to this application.

Printed Name of Applicant: _____Date: _____

Signature of Applicant: _____Date: _____

Printed Name of Property Owner: _____Date: _____

Signature of Property Owner: _____Date:_____

Office Use Only

Fee: ☐ Application Package $500.00 Payment Type: ☐ Check No.: ☐ Cash ☐ Electronic

☐ After the Fact $725.00
(Includes L/C Application)

_____ Payment

Date Application Received:_____ Application Number: _____

Public Hearing Date: _____ ☐ Completed L/C Application(s) ☐ Completed Use Statement

Application Approved On:_____ Associated Permit/Approvals Number(s): _____

Approved Permit No.: _____ _____

Approved by (staff): _____ _____

Review Items					
SUP General Impacts Applicant Response Review					
1.a.	☐ Insufficient	☐ Sufficient	2.a.	☐ Insufficient	☐ Sufficient
1.b.	☐ Insufficient	☐ Sufficient	2.b.	☐ Insufficient	☐ Sufficient
1.c.	☐ Insufficient	☐ Sufficient	3.a.	☐ Insufficient	☐ Sufficient
1.d.	☐ Insufficient	☐ Sufficient	3.b.	☐ Insufficient	☐ Sufficient
SUP Growth Policy Criteria Applicant Response Review					
Goal 1. A.	☐ Insufficient	☐ Sufficient			
Goal 1. B.	☐ Insufficient	☐ Sufficient			
Goal 1. C.	☐ Insufficient	☐ Sufficient			
Goal 1. D.	☐ Insufficient	☐ Sufficient			
Goal 1. E.	☐ Insufficient	☐ Sufficient			
Goal 1. F.	☐ Insufficient	☐ Sufficient			
Goal 1. G.	☐ Insufficient	☐ Sufficient			
Goal 1. H.	☐ Insufficient	☐ Sufficient			
Goal 1. I.	☐ Insufficient	☐ Sufficient			
Goal 1. J.	☐ Insufficient	☐ Sufficient			
Goal 2. A.	☐ Insufficient	☐ Sufficient			
Goal 2. B.	☐ Insufficient	☐ Sufficient			
Goal 2. C.	☐ Insufficient	☐ Sufficient			
Goal 2. D.	☐ Insufficient	☐ Sufficient			
Goal 2. E.	☐ Insufficient	☐ Sufficient			
Goal 2. F.	☐ Insufficient	☐ Sufficient			
Goal 3. A.	☐ Insufficient	☐ Sufficient			
Goal 3. B.	☐ Insufficient	☐ Sufficient			
Goal 3. C.	☐ Insufficient	☐ Sufficient			
Goal 3. D.	☐ Insufficient	☐ Sufficient			
Goal 4. A.	☐ Insufficient	☐ Sufficient			
Goal 4. B.	☐ Insufficient	☐ Sufficient			
Goal 4. C.	☐ Insufficient	☐ Sufficient			
Goal 4. D.	☐ Insufficient	☐ Sufficient			
Goal 5. A.	☐ Insufficient	☐ Sufficient			
Goal 5. B.	☐ Insufficient	☐ Sufficient			
Goal 5. C.	☐ Insufficient	☐ Sufficient			
Goal 5. D.	☐ Insufficient	☐ Sufficient			

Cascade County Use Statement Form

Cascade County Planning & GIS Department
121 4th St N, Suite 2H/I
Great Falls, MT 59401
Phone: 406-454-6905 | Fax: 406-454-6919

Permit No:_____
App. No.: _____
Applied Date:_____

The Use Statement Form is required for all Special Use Permit applications and is designed to provide pertinent information about the proposed use. It is important that the use statement provides a complete understanding of your proposal. The use statement that you submit must address all the following items that apply to your proposal. Your use statement must be written in on this form or written in a legible manner on a separate sheet of paper and submitted with your Special Use Permit application in print or by email. If your responses are written on a separate sheet of paper, indicate the number of each response corresponding with the item numbers listed below. Where a definite answer cannot be provided for any of the items below, provide an estimate and indicate any uncertainty. Begin by indicating all relevant uses of the proposal below and proceed to address each item. The form will not be considered complete without a signed and dated submission by the landowner and/or applicant.

Use type (check all that apply): ☐ Residential ☐ Commercial ☐ Industrial

If the proposed use is residential only then only questions 1-6 are required. For uses that are commercial and/or industrial all questions must be addressed. If the item does not pertain to the proposed use, then indicate that the item does not apply.

1. **Nature of the use - what do you propose to do and how do you plan to do it? Describe in detail.**

_____
_____
_____
_____
_____
_____
_____
_____
_____

2. **Access to the site:**

☐ Public Road ☐Private Road Surface: ☐ Paved ☐ Gravel ☐ Dirt

Indicate the planned access points in the site plan. If a new approach will be required, contact either Montana Department of Transportation or County Road and Bridge Division.

3. **Describe any planned advertising or signage. Include the size, appearance, and placement.**

_____
_____
_____

4. **Will existing buildings be used, or will new buildings be constructed (or both)? Indicate new and old buildings or structures on the required site plan.**

_____
_____
_____

5. **Will any landscaping or fencing be developed? If so, describe the type of landscaping and/or fencing elements planned. Use reference to the site plan for clarity.**

_____

_____

_____

6. **Does the proposed use require any other local, state, or federal permits or licensing? If so, indicate the permits and/or licenses and when they will be acquired. If the permit and/or license has already been acquired, provide the permit and/or license number.**

_____

_____

_____

_____

If the proposed use is residential only, you may stop here and sign at the end of the form.

7. **Operational time limits:**

Months (if seasonal): from _____ to _____

Days per week: _____

Hours (HH:MM AM/PM): from _____ to _____

Total hours per day: _____

Special activities: _____

Frequency: _____

Hours: from _____ to _____

Are these indoors or outdoors? _____

8. **Expected number of customers or visitors:**

Average per day: _____

Maximum per day: _____

Hours (when they will be there)(HH:MM AM/PM): from _____ to _____

9. **Number of employees:**

Current: _____

Future: _____

Hours they work (HH:MM AM/PM): from _____ to _____

Do any live on-site as a caretaker? _____

10. **Service and delivery vehicles:**

Number: _____

Type: _____

Frequency: _____

11. **Number of parking spaces for employees, customers, and service/delivery vehicles:**

_____

_____

_____

_____

12. **Are any goods to be sold on-site? If so, are these goods grown or produced on-site or at some other location? Explain.**

_____

_____

_____

_____

13. **What equipment is used? If available, provide pictures or a brochure**.

_____

_____

_____

_____

14. **What supplies or materials are used and how are they stored?**

_____

_____

_____

_____

15. **Does the use produce any of the following by-products which may be considered a nuisance?**

☐ Noise ☐ Glare ☐ Dust ☐ Odor ☐ Smoke

☐ Other _____

If so, explain how this will be reduced or eliminated?

_____

_____

_____

_____

_____

16. **Does the proposed use involve livestock animals? If so, provide the types of livestock and the approximate number of each type of animal involved.**

_____

_____

_____

_____

17. **Will any solid or liquid wastes be produced (other than septic system waste)? If so, list (for each) : (1) the type(s) of waste; (2) the estimated volume of waste; (3) how and where it will be stored; (4) how it will be hauled; (5) where it will be disposed at and how often.**

_____

_____

_____

_____

_____

_____

18. **Estimated volume of water to be used (gallons per day) and the source of water:**

_____

_____

19. **Explain which buildings or what portion of buildings will be used in the operation. Use reference to the indicated structures or buildings in the site plan for clarity.**

_____

_____

_____

_____

20. **Will any buildings or portions of buildings be rented or leased?** ☐ Yes ☐ No

21. **Will any outdoor lighting or an outdoor sound amplification system be used? If so, describe how and when they will be used.**

_____

_____

_____

22. **Is there any other information that will provide a clear understanding of the project or operation?**

_____

_____

_____

_____

_____

ATTEST: I hereby certify that the information given herein is true and correct to the best of my knowledge and acknowledge that the information provided herein may be binding upon issuance of an approved Special Use Permit with conditions.

Printed Name of Applicant:_____ Date: _____

Signature of Applicant:_____ Date: _____

Printed Name of Owner:_____ Date: _____

Signature of Owner:_____ Date: _____

Cascade County Location/Conformance Permit Application

Cascade County Planning & GIS Department
121 4th St N, Suite 2H/I
Great Falls, MT 59401
Phone: 406-454-6905 | Fax: 406-454-6919 | www.cascadecountymt.gov

Permit No:

App.No.:

Date:

GENERAL INFORMATION:

A Location/Conformance (L/C) Permit is required for all proposed buildings, structures, signs, land uses, and changes in land uses. L/C Permits are **not** required for non-commercial project proposals where the proposed structure or building is 200 square feet or less. L/C Permits are **not** required for "site preparation" as defined in the Cascade County Zoning Regulations (CCZR). A separate L/C Permit is required for each tract of land and for each distinct use in a project proposal.

Applications that have been submitted and deemed incomplete, been withdrawn by the Applicant, or otherwise placed on hold by the Applicant shall expire after three (3) months from the date of receipt. After an Application has expired a new Application must be obtained and submitted. Furthermore, legally issued L/C Permits shall expire one year after the date of approval if construction or the use permitted has not started. A one-time-only twelve (12) month extension may be granted by the Zoning Administrator upon request.

L/C Permit Applications require a non-refundable application fee of seventy-five dollars ($75.00). If a L/C Permit Application is applied for after the fact or construction/use starts before a permit is issued, then a non-refundable Application fee of three hundred dollars ($300.00) is required.

PROJECT INFORMATION:

Project Address							☐ **Needs an Address** *(This is an additional $25 fee)*	
Estimated Project Value ($)								
PROPERTY DESCRIPTION	Legal Description	Section		Township		Range		COS/Plat No.
		Part, Tract, Block, Lot Descriptors…						
		Subdivision						
	Parcel No.			Geocode				
	Total Parcel Area			Unit: ☐ Acres ☐ Square Feet				
APPLICANT *(Property Owner, Contractor, Business Representative, Engineer, etc. that is filling out this form)*	Name							
	Address							
	Phone No.							
	Email							
	Preferred Method of Contact							
PROPERTY OWNER *(If different from the Applicant)*	Name							
	Address							
	Phone No.							
APPLICATION TYPE	☐ New use	☐ New building/structure/foundation	☐ Sign					
	☐ Change of use	☐ Change to building/structure/foundation						
USE TYPE	☐ Single-Family Residence	☐ Accesory Building/Structure	☐ Industrial					
	☐ Duplex/2nd Dwelling	☐ Storage Facility	☐ Commercial					
	☐ Multi-Family Dwelling	☐ Marijuana Business	☐ Agricultural					
	☐ Tourist Home/B&B	☐ Natural Resource Extraction	☐ Other: _____					
STRUCTURES	Total Existing Structure Area (sq. ft.)		Number of Existing Structures					
	Total Proposed Structure Area (sq. ft.)		Number of Proposed Structures					
	Total Area of Alteration (sq. ft.)							
WATER/WASTE	Type of Wastewater Disposal		Will the proposed project be using water/wastewater? ☐ Yes ☐ No					
	Water Supply Source							
AG COVENANT	Are there any agricultural covenants on this property?		☐ Yes ☐ No					

FLOODPLAIN	Is any portion of the property in the Regulated Flood Hazard	☐ Yes	☐ No

PROJECT DESCRIPTION:

(Please explain what you plan to do)

_____

_____

_____

SUBMISSION CHECKLIST:

Location/Conformance Permit Applications shall be submitted to the Cascade County Planning Department for review. The following checklist **must be completed and signed by** the Applicant before this Application can be reviewed. All supporting permits and forms must be attached.

☐A site plan containing the following information:

- A scale not less than one inch equals one-hundred feet (1" = 100').
- Name and address of the Applicant.
- Legal description and boundary lines of the property being considered for review.
- Existing and proposed land use upon the site.
- Names of owners and existing land use on adjacent property.
- Location, size, dimensions, and uses of existing and proposed buildings and improvements.
- Location and description of existing and proposed utilities.
- Location and dimensions of curb cuts and access points.
- Location, size, dimensions, and the number of off-street parking spaces, including on-site vehicular driveways and type of surface improvements.
- Location and type of existing and proposed landscaping or buffering.
- Location, type, and height of existing and proposed fencing and screening.
- Location, type, and height of sight-obscuring improvement surrounding areas of storage for raw materials, finished products, machinery, and equipment.
- Delineate areas of RFHA boundaries (Floodplain).

☐A copy of the Subsurface Wastewater Treatment System Permit Application (attached). This is **required for** projects installing a septic system, re-utilizing a pre-existing septic system, or increasing the capacity of a pre-existing septic system on the subject property.

☐A copy of the General Permit for Small Municipal Separate Storm Sewer Systems (MS4) Permit Application (attached). This is **required for** projects that will disturb an acre or more of land.

☐A copy of the Floodplain Permit Application (attached). This is **required if** the project is in a regulated floodplain.

☐A copy of the Approach Permit Application (attached). This is **required if** the proposed approach is from a county or state road.

ATTESTATION STATEMENT AND SIGNATURE:

I hereby certify that the information given herein is true and correct to the best of my knowledge. There are no restrictions placed upon my property which would prohibit the issuance of this permit. If there are any restrictions, then this permit shall become null and void. I hereby grant permission to any Cascade County Zoning Official to enter my property to inspect for compliance with the County Zoning Regulations in relation to this application.

Signature of Applicant: _____ **Date:** _____

Signature of Property Owner : _____ **Date:** _____