



File No.: _____

Land Use Permit Application

Prior to preparing this application and any attachments, it is recommended that landowners and their representatives review the zoning regulations, their deed, plat or survey, easements (both recorded and those established by state law), County enforced covenants, and all other legal documents that apply to their property. In addition to legal requirements, these often contain important acknowledgements related to adjacent land uses, wildlife, agricultural irrigation infrastructure, emergency preparedness, and more that may be relevant to the landowner's decisions on the siting and design of proposed structures and other site elements.

1. **Property owner:** _____

2. **Site address:** _____

Section: _____ Township: _____ Range: _____ Block: _____ Lot/Tract/Parcel: _____

Subdivision/COS #/ Deed Reference: _____

DOR/Geocode #: 06 _____ Lot Area: _____ acres, or _____ sq. ft.

3. **Zoning District:** _____ **Sub-district (Zoning Designation):** _____

4. **Is this application in response to a letter from the Compliance Department?** ☐ YES ☐ NO

5. **Is there a corresponding Conditional Use Permit, Variance, or Buildings for Lease or Rent approval that authorizes the structure(s)?** ☐ YES ☐ NO

If yes, what is the permit number? (e.g., Z2024-444; list all applicable permits) _____

If yes, have all conditions of approval been met? ☐ YES (attach proof) ☐ NO (attach narrative explanation)

6. **What is the estimated market value of construction? (not including land cost):** _____

7. **Are there existing structure(s) on the property?** ☐ YES (Describe below) ☐ NO

Describe all existing structures below including small sheds, RVs, etc. Attach additional sheets as necessary.

Structure	Use of Structure	Square Footage of Structure	Date Built	OFFICE USE ONLY – Existing LUP/CUP/Variance?	App. #

8. **Is any portion of the property in a mapped floodplain?** ☐ YES ☐ NO

(If yes, you may be required to submit a copy of the appropriate floodplain map, documentation from a licensed professional showing the development activity is out of the floodplain, or a copy of the approved floodplain development permit. Please contact the Planning Department prior to submitting a Land Use Permit.)

9. What is the maximum existing slope underneath the proposed build site?

☐ 0-9.9% ☐ 10-14.9% ☐ 15-24.9% ☐ 25%+ ☐ Unknown

If unknown, describe the site: _____

10. Structure(s) proposed: *Check all that apply.* If more than one structure is proposed, please complete sections 10-12 for each structure and attach additional pages as necessary.

- ☐ Single-family residence
☐ Multi-family residence
☐ Commercial/industrial building(s)
☐ Addition onto an existing structure
☐ Other (*home-based business, fireworks stand, guest house, etc.*), describe: _____

Complete for all proposed structures:

Number of bedrooms: _____

Total square footage of floor area: _____

Total square footage of impervious surface: _____

Height (*according to zoning district definition of structure or building height*): _____

Pitch of main roof: _____

Foundation type: _____

Use of structure: ☐ Permanent ☐ Temporary

If temporary, list date of removal: _____

Condominium exemption required/proposed? ☐ YES ☐ NO

Will any portion of the structure be used as a short-term rental? (*e.g., rented out for periods less than 30 days, or as described in zoning regulation*) ☐ YES ☐ NO

If you selected Multi-Family or Commercial/Industrial above, please complete the following section:

Number of structures: _____

Number of units: _____

Will the units/structure(s) be rented or leased? ☐ YES ☐ NO

Number of bedrooms per unit: _____

Square feet of living space per unit: _____

Describe use of structure(s) and/or units: _____

If you selected Addition onto an Existing Structure above, please complete the following:

What type of structure will the addition be added to?

- ☐ Single-family residence
☐ Multi-family residence
☐ Commercial/industrial building
☐ Other (*please describe*): _____

Square footage of addition: _____

Use of addition: _____

11. Zoning Setbacks. Setback measurements are **always required**. Complete the setback table below for each proposed structure/addition and attach additional pages as needed. **Ensure that the setback measurements provided in the table below match the measurements provided on the site plan.** Failure to provide accurate and complete setback information may delay the review process.

	Actual Measurement to Outer Wall of Structure	Actual Measurement to Eaves/overhang of Structure	Setback Distance Required by Zoning Regulation	OFFICE USE: Setbacks Compliant with Zoning?	OFFICE USE: Setbacks Match Site Plan?
Front Property Line					
Rear Property Line					
Side Property Line 1					
Side Property Line 2					
Watercourse					
Irrigation ditch					
Other feature that requires setback					

12. Septic/Sewer System (complete one):

- ☐ No Septic/Sewer Connection Needed (Because structure is unplumbed)
- ☐ Septic System (Attach a copy of the 2-page Authorization to Construct approval from the Gallatin City-County Health Department)
 Permit Number: _____
 How many living units are approved?: _____
 How many bedrooms are approved?: _____
- ☐ Structure will be connected to _____ water and sewer system (e.g., Big Sky Water and Sewer District, Four Corners, etc., attach approval and Certificate of Subdivision Approval)
- ☐ Other method of sanitation/sewer service, describe and attach applicable approvals:

13. Site Inspection (We will conduct site visit unannounced unless a request for an appointment is made)

Are all corners of proposed structure clearly marked? ☐ YES ☐ NO
 If no, what date will the corners of structure be marked? _____
 Are all property corners clearly marked? ☐ YES ☐ NO
 Is it possible to access the site with a standard passenger vehicle? ☐ YES ☐ NO
 Is the parcel clearly labeled (e.g., address visible)? ☐ YES ☐ NO
 What road should we access the property from? _____
 What is the gate code? (if any): _____

Other relevant information we should know prior to site visit or about the application in general:

13. Contact Information. Please identify the primary contact using one or both check boxes below. The primary contact is the person/entity we will reach out to with questions:

☐ **Property owner name:** _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

☐ **Authorized agent or representative name:** _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

AGREEMENT

By signing this agreement, any authorized agent or representative hereby certifies they have permission from the property owner to sign on their behalf. Additionally, the property owner and/or authorized agent hereby certifies that:

- They have fully reviewed all legal and regulatory documents that apply to their property;
- The information submitted in this application is true and correct;
- If approved, all proposed work shall be done in accordance with the approved permit and zoning regulation.

Property owner or authorized representative signature Date

Property Owner or Authorized Representative Signature Date