



# CITY OF ROCK SPRINGS CONDITIONAL USE PERMIT APPLICATION

Planning & Zoning Division  
212 D Street  
Rock Springs WY 82901  
307.352.1540 (phone)  
307.352.1545 (fax)

**City Use Only:**

Date Received \_\_\_\_\_ File Number: \_\_\_\_\_

Approved     Approved with Conditions     Denied

Contact the Building Department at (307) 352-1540 for building permit submittal requirements.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of Action: \_\_\_\_\_ By: \_\_\_\_\_

\$60.00 Application Fee

**PROPERTY INFORMATION**

**PID:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Property Address: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Legal Description Quarter: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_

Zoning: \_\_\_\_\_ Overlay: \_\_\_\_\_ Floodplain Designation: \_\_\_\_\_

**CONTACT INFORMATION**

Petitioner: Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

Property Owner: Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

Engineer/Architect: Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

C.U.P. Requiring  
Planning and Zoning Commission Approval

C.U.P. Requiring  
Staff Level Approval

- Adjusted Front Setback
- Bed and Breakfast Inn
- Corner Side Yard Attached Carport
- Detached Garage Exceeding 1,200sf
- Gas Pumps & Fueling Stations
- Lot Coverage Exceeding 50%
- Off-Site Parking
- Use of Explosives
- Other, please specify: \_\_\_\_\_

- Accessory Structure Exceeding Height of Primary Structure
- Special Purpose Fence
- Unpaved Parking Area
- Land Reclamation, Mining, & Soil Processing
- Garage Exceeding Three (3) Doors
- Driveway Exceeding 65% Street Frontage
- Other, please specify: \_\_\_\_\_

**PLEASE ANSWER THE FOLLOWING ON THE SPACES PROVIDED**

1. Provide a detailed description of the intended Conditional Use, including proposed use, length of use (permanent or temporary), hours of operation, etc.

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2. Describe all structures located on this property, including existing and proposed structures. **A site plan shall accompany this application.** Please refer to the enclosed Site Plan Checklist.

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## **SUBMITTAL REQUIREMENTS**

The following items are required for submitting a complete Conditional Use Permit / Site Plan Application and must be submitted in accordance with the submittal deadlines listed on Page 4 of this application. Applications submitted after the submittal deadlines as listed will be postponed until the following month. An incomplete application will not be reviewed and will be returned to the petitioner.

- Filing Fee - \$60.00
- 2 – Full-size Site Plan drawings drawn to scale (folded)
- 1 - 11x17 Site Plan drawing drawn to scale (if full-size drawing is larger than 11x17)
- 1 – PDF scanned at full-size of Site Plan drawing (submitted electronically to city\_planner@rswy.net)
- Building Elevations / Architectural Drawings (to scale)

## **SITE PLAN CHECKLIST**

The following items shall be shown on your site plan (check them off as you consider each one):

- Project Address
- Location map
- Names and mailing addresses of developer / owner and engineer / architect
- Boundary line of property with all dimensions
- Adjacent streets and street rights-of-way
- Gross square footage of existing and proposed structures, including number of floors
- All paved and unpaved surfaces
- Parking facilities (including handicap parking) – including dimension of parking stalls, drive aisle widths, etc.
- Buildings and structures (existing and proposed), including setbacks from property lines for all structures
- Easements (access, utility, drainage, pedestrian, etc.)
- Utilities
- Landscaping
- Exterior signs
- Trash enclosures
- Surface water drainage arrows
- Location of Floodplain and/or Floodway on property, if applicable (separate Floodplain Development Permit Application also required)

## **SIGNATURE(S) REQUIRED**

I acknowledge that I have read and understand this application and the pertinent Ordinances of the City of Rock Springs. I further agree if the permit is approved, I will comply with all pertinent regulations and conditions as set forth by the City of Rock Springs. I certify that the information provided with this application is true and correct and false or inaccurate information used by an applicant to secure compliance with the Zoning Ordinance shall be reason to deny or revoke any application or permit. I understand that it the responsibility of the developer and/or property owner to secure any and all required Local, Federal and State Permits (i.e. DEQ permits, County Permits, etc.) and I agree to contact those agencies accordingly.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Owner \_\_\_\_\_ Date \_\_\_\_\_

Signature of Engineer/Architect (if applicable) \_\_\_\_\_ Date \_\_\_\_\_