

APPLICATION FOR "RESIDENTIAL" ENCROACHMENT

THIS SECTION TO BE FILLED OUT BY PROPERTY OWNER

RESIDENT NAME

RESIDENT PHONE NUMBER

CONTACT NAME

CONTACT PHONE NUMBER

PROPERTY ADDRESS

CONTACT EMAIL

CITY, STATE, ZIP CODE

PARCEL NUMBER

LEGAL DESCRIPTION OF PROPERTY ATTACHED:

SOC. SEC. (Optional)

Description for use of Property (Must be submitted at the time of application)

(attach a dimensional site plan & elevation drawing to scale on 8 1/2 x 11 paper)

THIS SECTION TO BE FILLED OUT BY DRT (DEVELOPMENT REVIEW TEAM)

Conditions Determined by Development Review Team:

Zoning:	_____	Date:	_____	Approved	_____	Denied	_____
Publ. Util:	_____	Date:	_____	Approved	_____	Denied	_____
Engineering:	_____	Date:	_____	Approved	_____	Denied	_____
Transportation:	_____	Date:	_____	Approved	_____	Denied	_____
Fire:	_____	Date:	_____	Approved	_____	Denied	_____

To schedule DRT Meeting contact: DeeDee Robinson - 801 535-6629 or email DeeDee.Robinson@slcgov.com

THIS SECTION TO BE COMPLETED BY PROPERTY MANAGEMENT

_____ Description Letter (Outline what applicant is requesting. Include anticipated work.)

_____ DRT Signed off _____ DRT # _____

_____ Drawings (2) (with details and dimensional site plan on 8 1/2 x 11 paper)

_____ Application Fee \$25.00 (Non Refundable)

_____ OKAY to Issue: Real Estate Services has all documents on file

_____ OKAY to issue: Subject to _____

Checked By _____

_____ Date