

LAND USE PERMIT

San Juan County, Colorado

Applicant:	Permit No.:
Address:	
City and State:	Telephone:

Description of Use:

Dates and Times of Use:

Location of Use:

Areas of Concern: Applicant should provide attachments for each relevant area
 Land Use Administrator will initial approval if appropriate

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|--------------------------|--|-------------------------------------|
| Property Ownership _____ | | Permission of Property Owner _____ |
| Vicinity Map _____ | | Plans and Drawings _____ |
| Natural Hazards _____ | | Zoning Compatibility _____ |
| Sanitation _____ | | Environmental Impacts _____ |
| Building Permit _____ | | Federal and /or State Permits _____ |
| Security _____ | | Emergency Services _____ |
| Parking _____ | | insurance Coverage _____ |
| Clean Up _____ | | County Road Impact _____ |
| Other _____ | | Other _____ |

Date Application Submitted:	By (signature):
Date Permit Issued:	By (signature):
Conditions	
Acceptance of Conditions:	By (signature):