



Fremont County Planning & Building Department
 125 North Bridge St Suite 1
 St. Anthony ID 83445
 (208) 624-4643
 (208)624-1320
 www.co.fremont.id.us

Fremont County Sketch Plan Application

Permit# _____

RA _____

Submittals: All information called for on this form and the accompanying checklist, including the required fee, shall be required for a complete application. Plans sufficient to demonstrate compliance with all requirements of the Fremont County Development Code must be attached, including a sketch plat. No incomplete application will begin the review process.

- Warranty Deed or evidence of proprietary interest.**
- Proper fee paid. \$210.00 for Sketch Plan**
- Has met with and received a letter from Fremont County Public Works Director concerning roads.**

SITE INFORMATION:

Location: Quarter: _____ Section: _____ Township: _____ Range: _____ Total Acres _____

Proposed subdivision/Development Name: _____

Proposed Road Names (if applicable): _____

Parcel Number(s): _____ **Assessor's Categories:** _____

RESIDENTIAL DENSITY ASSIGNMENTS BY LAND TYPE
 (estimate approximate acreage for each site characteristic)

site characteristics	average density, one dwelling unit per	proposed project land type
wetland, slopes over 30%	25 acres	
stream corridors, critical wildlife habitat slope of 15%-30%	10 acres	
other areas	2.5 acres	
productive cropland (applicable to NF & SF zoning districts)	40 acres	

This signature acknowledge that all information on this application and the attached plans is true and correct, AND the activity permitted will be conducted in full compliance with all ordinances of Fremont County, and state and federal law; AND that the activity conducted will be in full compliance with any and all conditions imposed on the permit's approval.

I hereby acknowledge that this is not a regulatory proceeding and is non-binding on either party.

This permit expires in two years.

Property Owner: Name: _____ **Developer:** Name: _____
Address: _____ **Address:** _____
City: _____ **State:** _____ **Zip:** _____ **City:** _____ **State:** _____ **Zip:** _____
Telephone: _____ **Cell:** _____ **Telephone:** _____ **Cell:** _____

I consent to this application and allow planning & building staff to enter the property for site inspections related to this application.

I certify information is correct to the best of my knowledge.

Signature (Owner) **Date:** _____ **Signature (Developer)** **Date:** _____

Engineer/Surveying Firm: _____
Representatives Name: _____
Address: _____ **City:** _____ **State:** _____ **Zip:** _____
Telephone: _____ **Fax:** _____ **Cell:** _____

Request Accepted By:	Date:	Review Conducted:

