



# BONNER COUNTY PLANNING DEPARTMENT

1500 HIGHWAY 2, SUITE 208, SANDPOINT, ID 83864 (208) 265-1458 (208) 265-1463 (FAX)  
planning@co.bonner.id.us (e-mail) <http://www.co.bonner.id.us/planning/index.html> (web page)

## COMPREHENSIVE PLAN MAP AMENDMENT APPLICATION

### FOR OFFICE USE ONLY:

FILE #	RECEIVED:
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### PROPOSED AMENDMENT:

The applicant is requesting an amendment to the Comprehensive Plan map
<b>From:</b> (Current Comprehensive plan land use map designation)
Effective date of current map:
<b>To:</b> (Proposed comprehensive plan land use designation)

### APPLICANT INFORMATION:

Landowner's name:		
Mailing address:		
City:	State:	Zip code:
Telephone:	Fax:	
E-mail:		

### REPRESENTATIVE'S INFORMATION:

Representative's name:		
Company name:		
Mailing address:		
City:	State:	Zip code:
Telephone:	Fax:	
E-mail:		

### ADDITIONAL APPLICANT REPRESENTATIVE INFORMATION:

Name/Relationship to the project:		
Company name:		
Mailing address:		
City:	State:	Zip code:
Telephone:	Fax:	
E-mail:		

**PARCEL INFORMATION:**

Section #:	Township:	Range:	Parcel acreage:
Parcel # (s):			
Legal description: _____ _____			
Current zoning:		Current use:	
What zoning districts border the project site?			
North:		East:	
South:		West:	
Comprehensive plan designation:			
Uses of the surrounding land (describe lot sizes, structures, uses):			
North:			
South:			
East:			
West:			
Nearest city:		Distance to the nearest city:	
Detailed Directions to Site: _____ _____ _____ _____ _____			

**PROJECT DETAILS:**

Explain in detail the reason for the requested amendment to the comprehensive plan:
What circumstances warrant an amendment of the comprehensive plan map designation? _____ _____
Explain how the proposed comprehensive plan amendment will effect elements such as noise, light glare, odor, fumes and vibrations on adjoining property: _____ _____ _____
How has the proposal been designed to be compatible with the adjoining land uses? _____ _____ _____ _____
What extensions of water or sewer lines, roads or other public or private services would be necessary if this comprehensive plan amendment were approved? _____ _____ _____ _____ _____

[illegible]

**ACCESS INFORMATION:**

Please check the appropriate boxes:

<input type="checkbox"/>	<u>Private Easement</u> <input type="checkbox"/> <u>Existing</u> <input type="checkbox"/> <u>Proposed</u> Describe travel surface (e.g., gravel, dirt, paved, etc.), travel way width, road grade and easement width. Include recorded instrument number for existing easements & name, if existing: _____ _____ _____
<input type="checkbox"/>	<u>Public Road</u> <input type="checkbox"/> <u>Existing</u> <input type="checkbox"/> <u>Proposed</u> Describe travel surface (e.g., gravel, dirt, paved, etc.), travel way width, road grade right-of-way width and name, if existing: _____ _____ _____
<input type="checkbox"/>	<u>Combination of Public Road/Private Easement</u> <input type="checkbox"/> <u>Existing</u> <input type="checkbox"/> <u>Proposed</u> Describe travel surface (e.g., gravel, dirt, paved, etc.), travel way width, road grade and right-of-way/easement width and road name, if existing: _____ _____ _____

**SITE INFORMATION:**

Please provide a detailed description of the following land features:

Topography (lay of the land), including estimated maximum slope, rock outcroppings, benches, etc:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Water courses (lakes, streams, rivers & other bodies of water): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Springs & wells: \_\_\_\_\_

\_\_\_\_\_

Existing structures (size & use): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Land cover (timber, pastures, etc): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are wetlands present on site? ☐ Yes ☐ No

Source of information:

Other pertinent information (attach additional pages if needed): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SERVICES:**

Sewage disposal will be provided by:

☐Existing Community System - List name of sewer district or provider and type of system:  
\_\_\_\_\_  
\_\_\_\_\_☐Proposed Community System - List type & proposed ownership: \_\_\_\_\_  
\_\_\_\_\_☐Individual system - List type: \_\_\_\_\_Explain the type of sewage system, capacity, maintenance plan, location of facilities, if applicable and other details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Water will be supplied by:

☐Existing public or community system - List name of provider: \_\_\_\_\_☐Proposed Community System - List type & proposed ownership: \_\_\_\_\_  
\_\_\_\_\_☐Individual wellPlease explain the water source, capacity, system maintenance plan, storage and delivery system and other details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Distance (in miles) to the nearest:

Public/Community Sewer System:

Solid Waste Collection Facility:

Public/Community Water System:

Fire Station:

Elementary School:

Secondary Schools:

County Road:

County Road Name:

Which fire district will serve the project site? \_\_\_\_\_

Which power company will serve the project site? \_\_\_\_\_

**How is the proposed subdivision in accordance with the specific objectives of the comprehensive plan? (Please see attached copy of the goals and objectives):**Property Rights: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_Population: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_School Facilities & Transportation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_Economic Development: \_\_\_\_\_  
\_\_\_\_\_

Land Use: _____
_____
Natural Resources: _____
_____
Hazardous Areas: _____
_____
Public Services: _____
_____
Transportation: _____
_____
Recreation: _____
_____
Special Areas or Sites: _____
_____
Housing: _____
_____
Community Design: _____
_____
Agriculture: _____
_____
Implementation: ( Not required to complete this element)

I hereby certify that all the information, statements, attachments and exhibits submitted herewith are true to the best of my knowledge. I further grant permission to Bonner County employees and representatives, elected or appointed officials to enter upon the subject land to make examinations, post the property or review the premises relative to the processing of this application.

Landowner's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Landowner's signature: \_\_\_\_\_ Date: \_\_\_\_\_