



APPLICANT INFORMATION

Date: 2/17/2022

Name: Sarah Langwell

Address: 915 W. Highway 12

City: Boulder

State: Utah

Zip: 84716

Phone: 505/379-6304

Fax:

Cell Phone: SAME

Email: slangwell@gmail.com

Contact Person:

CONDITIONAL USE and SITE PLAN APPLICATION Fee Amount: \$

Proposed Conditional Use: Short term rental

Location/Address of Proposed Application: 915 W. Highway 12 Boulder, Utah 84716

Current Zoning District: low density residential

Total Acreage (square feet or acres) of Site: 1.07 acres

Name of Property Owners: Sarah Langwell

Signature of Applicant(s): [Signature]

Boulder Town Office Use Only

Date Received:

Date Determined Complete:

Fees Paid:

PROPERTY OWNER AFFIDAVIT

STATE OF UTAH }
 }ss
COUNTY OF GARFIELD}

I (we), _____, depose and say that I (we) am (are) the owner(s) of the property identified in the attached application and that the statements herein contained and the information provided in the attached plans and other exhibits are in all respects true and correct to the best of my (our) knowledge.

(Property Owner)

(Property Owner)

Subscribed and sworn to me this _____ day of _____, 20_____.

(Notary)

My commission expires: _____

.....

AGENT AUTHORIZATION AFFIDAVIT

I (we), _____, the owner(s) of the real property described in the attached application, do authorized as my (our) agent(s), _____, to represent me (us) regarding the attached application and to appear on my (our) behalf before any administrative or legislative body in the Town considering this application and to act in all respects as our agent in matters pertaining to the attached application.

(Property Owner)

(Property Owner)

Dated this _____ day of _____, 20_____, personally appeared before me _____, the signer(s) of the agent authorization who duly acknowledged to me that they executed the same.

(Notary)

My commission expires: _____