



Conditional Use Permit - Mining, Quarry, Sand, and Gravel Excavation Application

Fee \$1,000.00 (+\$250/annual inspection fee)

Property information and location (all lines applicable to this site must be filled in)

Parcel # _____ Lot # _____

Subdivision Name: _____

(For office use only)

CUP #: _____ Fee \$1,000.00 Receipt #: _____

Will this be associated with an existing or another Conditional Use Permit (CUP)? **Yes** **No**

Permanent or Temporary

Application Determination:

Approved

Denied

Conditions imposed? Yes No

By: _____ Date: _____

Property Owner(s) Information

Name(s): _____

Address per tax rolls: _____

City/County: _____ State: _____ Zip: _____

Office/home phone: _____ Fax: _____

Mobile phone: _____ Message phone: _____

Email address: _____

Applicant's Information if different than Property Owner(s)

**Property Owner's Authorization notarization needed.*

Name(s): _____

Address per tax rolls: _____

City/County: _____ State: _____ Zip: _____

Office/home phone: _____ Fax: _____

Mobile phone: _____ Message phone: _____

Email address: _____

General Information of Operation Site

Name(s) of Operator(s): _____

Permanent Business mailing address: _____

City/County: _____ State: _____ Zip: _____

Office Phone: _____ Fax: _____

Mobile phone (required): _____ Message phone: _____

Email address: _____

Name(s) of Initial Representative/liaison(s): _____

(The representatives shall be available at all reasonable times to discuss and review the Excavation Permit)

Permanent Business mailing address: _____

City/County: _____ State: _____ Zip: _____

Office Phone: _____ Fax: _____

Mobile phone (required): _____ Message phone: _____

All required information in this application must be completely filled out, labeled, marked, tabbed, and signed with required paperwork submitted or application will be denied.

There shall be no presumption of approval of any aspect of the process.

APPLICATION IS HEREBY MADE TO COMMUNITY DEVELOPMENT REQUESTING THAT:

(Describe in as much detail as possible the business and use on property)

Total acreage of parcel(s): _____ Area occupied by this use: _____

Current zoning designation: _____ Current use of land (residential, commercial, etc.): _____

Select a Gravel Operation Category: Permanent Commercial Temporary for Specific Project

Include the following with the application:

27-4. Application.

All applications for conditional use permits shall be accompanied by the following materials:

Applicant	County
(a)	Application form for a conditional use permit;
(b)	Evidence of ownership or control over the land and a legal description of the property where the pit will be located;
(c)	Evidence of capability to complete the project, which includes:
(i)	A statement of the applicant's ability to post performance bonds or other financial assurance;
(ii)	Cost estimates for reclamation costs to include removal of roads, buildings, overburden, etc;
(iii)	Liability insurance coverage;
(d)	A site plan showing:
(i)	All prominent man made and geologic features within the surrounding areas that will be affected by the operation;
(ii)	Dimensions;
(iii)	Locations, clearances, and rights-of-ways, easements, utility lines;
(iv)	property lines and names of adjoining property owners;

Chapter 30-4. Application Contents and Review Procedures. In order to ensure that the existing or proposed excavation operation is conducted in a manner that will mitigate the effects on the community and provide for reclamation of the land to a state that enables meaningful use and respects aesthetic values, the Owner or Operator shall, prior to the commencement of any phase of operation, submit to the CDD an Application containing, among other things, a proposed Operation and Reclamation Plan which addresses the following:

A. General Information. The following shall be provided:

Applicant	County
1.	The name, permanent business mailing address, and telephone number, including a cell phone number, of the Operator responsible for the mining operations and reclamation of the site. (Above).
2.	The name, permanent mailing address, and telephone number of the Owner(s) of all land to be included as a part of the operations. (Above).
3.	The name, permanent business mailing address, and telephone number, including a cell phone number, of the initial representative designated or appointed by the Owner or Operator to serve as the initial representative to act as a liaison between the County and its various departments and the Owner or Operator. The Owner or Operator may change its designated representatives by notice. The representatives shall be available at all reasonable times to discuss and review the Excavation Permit. (Above)
4.	The name and mailing address of the surface landowner(s) and mineral owner(s) as set forth in the public property tax records available from the County of all land directly adjacent to the operations. (Provided through the Recorder's office).
5.	The DOGM Notice of Intent Application approval, if subject to DOGM oversight.
6.	Proposed starting date and the anticipated period of operation.
7.	Preliminary reclamation plan as described in section 30-9 .

B. Plans, Drawing, Materials Required.

One hard copy and an electronic copy of:

Applicant	County
1.	All items submitted to or required by DOGM for the Notice of Intent Application approval (including surety), or equivalent information if not subject to DOGM oversight.

2. A regional vicinity analysis describing other land uses within one thousand feet (1000') of the site, the possible impacts of the proposed excavation on surrounding land and, if necessary, any proposed measures to mitigate these impacts;
3. A description of the hauling routes anticipated to be employed by the Operator in hauling material from the excavation site to roads maintained by the County or State;
4. A description of the visual characteristics, with particular attention given to the potential use of existing natural topography and vegetation, and, if necessary, to shield site operations from nearby properties, roadways, and the general public;
5. The most currently available aerial photograph of the proposed excavation site and adjacent properties;
6. All maps, drawings or cross sections as found in the DOGM application, if applicable;
7. Planned phases of excavation and anticipated amount of material to be removed at each phase, depicted on an appropriate map;
8. Number, type and kinds of machinery and equipment to be used;
9. Operational processes to be used, including crushing, stockpiling, milling, etc.;
10. The water to be used in operations, its source, control and disposal;
11. Electrical power requirements, source and control;
12. Accessory facilities, such as scales and buildings;
13. Sanitary facilities and disposal system;
14. Proposed techniques to be used for control of dust and noise;
15. Storm Water Management Plan (SWPPP).
16. Proposed lighting plan.
17. A proposed Operation and Reclamation Plan.
18. Division of Air Quality Permit.

Additional information required:

Applicant County

Mailing labels of property owners within 1000' of the property which is subject of the Application (taken from outer boundary lines of subject property).

I (We) understand that Site plan approval shall be required as a condition to receiving a building or conditional use permit for all permitted or conditional uses in all zoning districts. Sites must meet minimum development standards of Tooele County for the intended use. Upon planning commission approval of the CUP, planning commission or staff find that other conditions are required that may affect the site plan, the site plan must be adjusted before a permit can be issued.

I (We) do understand and will follow all regulations listed in Tooele County Land Use codes pertaining to Mining, Quarry, Sand, and Gravel Excavation. Found in Tooele County Land Use Chapters 7, 8, 12, 27, 30 and any other applicable chapters. I (We) will also abide by and follow all state, federal and local laws and regulations.

APPLICANT'S SIGNATURE

DATE

PROPERTY OWNER'S SIGNATURE

DATE

OPERATOR'S SIGNATURE

DATE

INITIAL REPRESENTATIVE/LIASON'S SIGNATURE

DATE

AFFIDAVIT

PROPERTY OWNER'S AUTHORIZATION

I (we), _____ the owner(s) of the real property located as follows: _____ and further described in the attached application, do authorize the applicant listed in this application permissions to use this property as listed in this CUP application. I (We) understand that if the use is granted it will stay with the property if new residence(s) move in. We further understand that if this use is discontinued for a year or more the use is no longer allowed on the property and a new CUP application will be required. Any violations regarding this CUP will be addressed with the property owner.

(Property Owner)

(Property Owner)

(Property Owner)

(Property Owner)

Notary

STATE OF UTAH)

:ss

County of Tooele)

Dated this _____ day of _____, 20 _____, the property owners above personally appeared before me and acknowledged that he/she signed the above Notice and that the statements contained therein are true.

My Commission Expires

Notary Public