

**APPLICATION
EMERY COUNTY LAND USE PERMIT**

Please complete this application by filling in all sections that are applicable to your development. On Premises Occupation Permit Applicants only need to fill out sections 1, 2, 3, and 6. Please read the checklist that has been provided to you and make sure you include all the information listed in it with your application. If you have any questions, contact the Emery County Zoning Office at (435) 381-5374.

Type Of Permit

Conditional Use On Premises Occupation Zone Change Subdivision

1. Type of Use

Mining Gas / Oil Well Recreational Research Utility Industrial
 Residential Agricultural Other (please describe) _____

2. Applicant Information

Name: _____

Permanent Address: _____ Phone: _____ Fax: _____

Contact Person: _____

Name of Operation: _____

3. Location

Qtr/Qtr, Section, Township, Range: _____

USGS Quadrangle Name: _____

(Quadrangle name not required for On-Premises Occupation Permit)

4. Surface / Mineral Ownership

Ownership of Land Surface:

Private BLM USFS State Trust Land St. Sovereign Lands Other _____

Name/Address of private land owner: _____

Ownership of Minerals: (if applicable)

Private BLM USFS State Trust Land St. Sovereign Lands

Private owner's name/address: _____

Mining Claim Number(s): _____ Lease Number(s): _____

Name of Lessee(s): _____

5. State/Federal Agency Approval Status

If your operation is located on State or Federal land or will impact a State highway, please indicate the status of your request with the applicable agencies.

Agency	Application Submitted	Permitted	Agency	Application Submitted	Permitted
State Division Of Oil Gas & Mining			State Department of Transportation		
State Institutional Trust Lands Administration			U.S. Forest Service		
State Historical Preservation Officer			Bureau of Land Management		
Other _____			Other _____		

6. Applicant Signature

The undersigned certifies that he/she is an authorized agent of the Applicant named above, and that to the best of his/her knowledge, information and belief, the information stated herein is true, complete and correct. The applicant agrees to continuously supplement this application as new information comes available or as plans change.

Signature _____ Date _____

FOR COUNTY USE

Permit Level:

Level 1 Level 2 Level 3

Application Fee: _____

Zoning Administrator

Date