



Development Services

Department

201 1st Avenue East

Kalispell, MT 59901

Phone (406) 758-7940

ADMINISTRATIVE ADJUSTMENT

Email: planning@kalispell.com

Website: www.kalispell.com

Project Name

Property Address

NAME OF APPLICANT

Applicant Phone

Applicant Address

City, State, Zip

Applicant Email Address

If not current owner, please attach a letter from the current owner authorizing the applicant to proceed with the application.

OWNER OF RECORD

Owner Phone

Owner Address

City, State, Zip

Owner Email Address

CONSULTANT (ARCHITECT/ENGINEER)

Phone

Address

City, State, Zip

Email Address

POINT OF CONTACT FOR REVIEW COMMENTS

Phone

Address

City, State, Zip

Email Address

List **ALL** owners (any individual or other entity with an ownership interest in the property):

Legal Description (please attach a full legal description for the property and a copy of the most recent deed).

Before the application will be deemed to be accepted for review, our office must receive an approval of the legal description from the Flathead County Plat Room. Please submit the legal description to their office (plat@flathead.mt.gov).



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PLEASE SELECT THE ADJUSTMENT YOU ARE REQUESTING BELOW ALONG WITH A BRIEF DESCRIPTION IN THE SPACE PROVIDED:

	<u>Maximum Allowable Modification</u>
Height limits for buildings (contained in development standards for each zoning district)	10%

Building setbacks (contained in development standards for each zoning district)	20%

Required setback for parking spaces (Section 27.24.030(2))	30%

Minimum required number of parking spaces (Section 27.24.050)	10%

ON A SEPERATE SHEET OF PAPER PLEASE ADDRESS HOW YOU PLAN TO MEET THE FOLLOWING FOUR CRITERIA:

1. The request is consistent with the character of development in the surrounding area, and will not result in incompatible uses.
2. Any adverse impacts resulting from the adjustment will be mitigated to the maximum extent practicable.
3. The request is of a technical nature (i.e. relief from a dimensional or design standard) and is based on three or more of the following:
 - (a) Required to compensate for some unusual aspect of the site or the proposed development that is not shared by landowners in general;
 - (b) Supporting an objective or goal from the purpose and intent statements of the zone district where located;
 - (c) Proposed to provide improved architectural appearance or site design;
 - (d) Proposed to save healthy existing trees (recommendation to be provided by the parks department based upon age, caliper, condition, and value); or
 - (e) Proposed to maintain the historic integrity of a structure which is on, or is eligible to be on, the historic registry.

4. The request will not substantially interfere with the convenient and enjoyable use of adjacent lands, and will not pose a danger to public health or safety.

Administrative Adjustment Fee _____ \$25 _____

I hereby certify under penalty of perjury and the laws of the State of Montana that the information submitted herein, on all other submitted forms, documents, plans or any other information submitted as a part of this application, to be true, complete, and accurate to the best of my knowledge. Should any information or representation submitted in connection with this application be incorrect or untrue, I understand that any approval based thereon may be rescinded, and other appropriate action taken. The signing of this application signifies approval for the Kalispell City staff to be present on the property for routine monitoring and inspection during the approval and development process.

Applicant Signature _____

Date _____