



APACHE COUNTY — Community Development Department

P.O. Box 238 • St. Johns, AZ 85936 • Phone: (928) 337-7526 • Fax: (928) 337-7633

CONDITIONAL USE PERMIT APPLICATION

APPLICANT

Name Mary Linn

Mailing Address PO. Box 710
Pinetop, AZ 85935

Contact Person Mary Linn

Phone 928-205-3887 Fax _____

Email MJBATEMAN12@gmail.com

PROPERTY INFORMATION

Assessor's Parcel # 106-22-008K

Township 10N Range 24E Section 12

Subdivision _____

Unit # _____ Lot # _____

Address/Location _____

Existing Zoning _____

Existing Land Use _____

Lot Size 5 Acres

CONDITIONAL USE PERMIT REQUEST

Please provide a brief description of the request.

To move 2002 Schult mobile
home 32x76 on to the
property of parcel #106-22-008K

Temporary Use: ___ Yes ___ No

SUBMITTAL CHECKLIST

- Pre-application meeting with a staff planner in the Planning and Zoning Division.
- Proof of Ownership.
- Application, photographs, diagrams, site plans with the setbacks noted, and any other required information. Please be precise and detailed. (See the attached guidelines)
- Citizen Review Process as listed in ordinance Section 1106. And a list of names and addresses of all the property owners Within 300 feet of subject property.
- Map to property.
- A non-refundable filing fee.
- All required items need to be submitted to Planning and Zoning at least 30 days prior to the next scheduled meeting.

CERTIFICATION & SIGNATURE

Submittal of this application constitutes consent of the applicant in granting the Community Development Department access to the subject property during the course of project review. No further consent or notice shall be required.

I hereby certify that the information in this application is correct and agree to abide by the regulations of this jurisdiction.

Signature of Applicant

Mary Linn Date 12/11/2021

Signature of Property Owner (if not the applicant)

Wanda Caswell Date 12/11/2021

OFFICE USE ONLY

Received By [Signature] Date 12/28/21

Receipt # 2294793 Fee 300

Permit # 2021-78

Related Cases _____

Appeal Filed By _____ Date _____

Receipt # _____ Fee _____

COMMISSION ACTION

Approved with Conditions Denied

Resolution # _____ Date _____

Chairman _____ Date _____

BOARD ACTION

Approved with Conditions Denied

Ordinance # _____ Date _____

Supervisor _____ Date _____

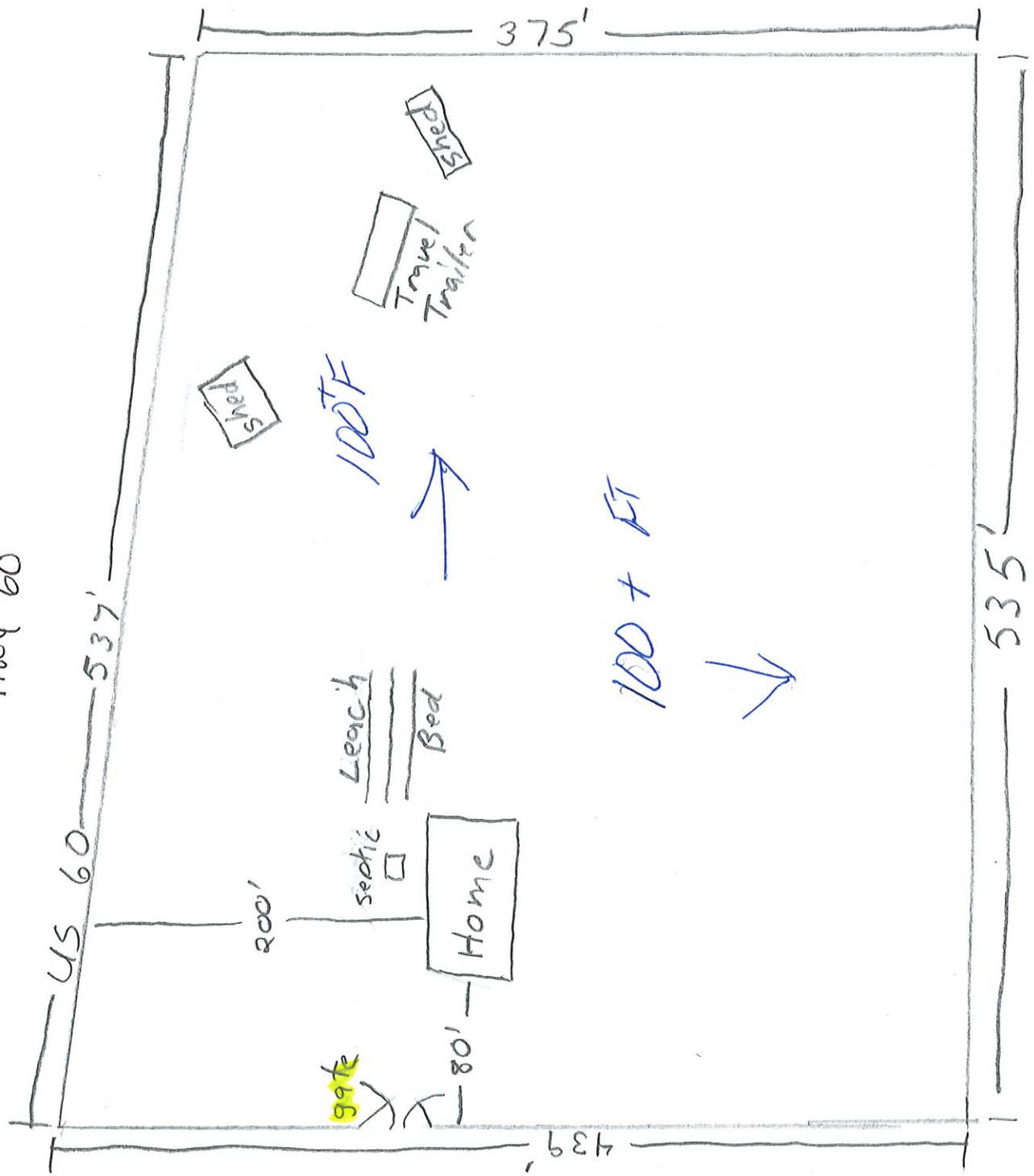






north
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MARY LINA
928 205 3887



CR 3334

Apache County Map

