



APACHE COUNTY Community Development Department

P.O. Box 238 • St. Johns, AZ 85936 • Phone: (928) 337-7527 • Fax: (928) 337-7633

CONDITIONAL USE PERMIT APPLICATION

APPLICANT

Name Dusty Fitzwater

Mailing Address _____

po box 594 Alpine, az 85920

Contact Person Dusty Fitzwater

Phone 602-763-8380 Fax 480-982-7588

Email Dusty@aztecpool.com

PROPERTY INFORMATION

Assessor's Parcel # 101-28-029

Township _____ Range _____ Section _____

Subdivision _____

Unit # _____ Lot # _____

Address/Location 4 county road 2096

Existing Zoning _____

Existing Land Use _____

Lot Size _____

CONDITIONAL USE PERMIT REQUEST

Please provide a brief description of the request.

Asking to have 2 Rv pads for family use on weekends and holidays. one pad will be used myself for a park model home instead of Rv. Future cabin built home will be done in the near future.

Temporary Use: Yes No

SUBMITTAL CHECKLIST

- Pre-application meeting with a staff planner.
- A non-refundable filing fee.
- Proof of Ownership.
- Application, photographs, diagrams, site plans with the setbacks noted, drainage report and any other required information. Please be precise and detailed.
- Citizen Review Process as listed in ordinance Section 1106. A list of names and addresses of all the property owners within 300 feet of subject property.
- ADOT permit granting ingress / egress assess
- Map to property.
- All required items need to be submitted to Planning & 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

Dusty Fitzwater Date 8-20-2024

Signature of Property Owner (if not the applicant)

Date _____

OFFICE USE ONLY

Received By [Signature] Date 9/3/24

Receipt # 6569 Fee \$500-

Permit # 2024-55

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 _____

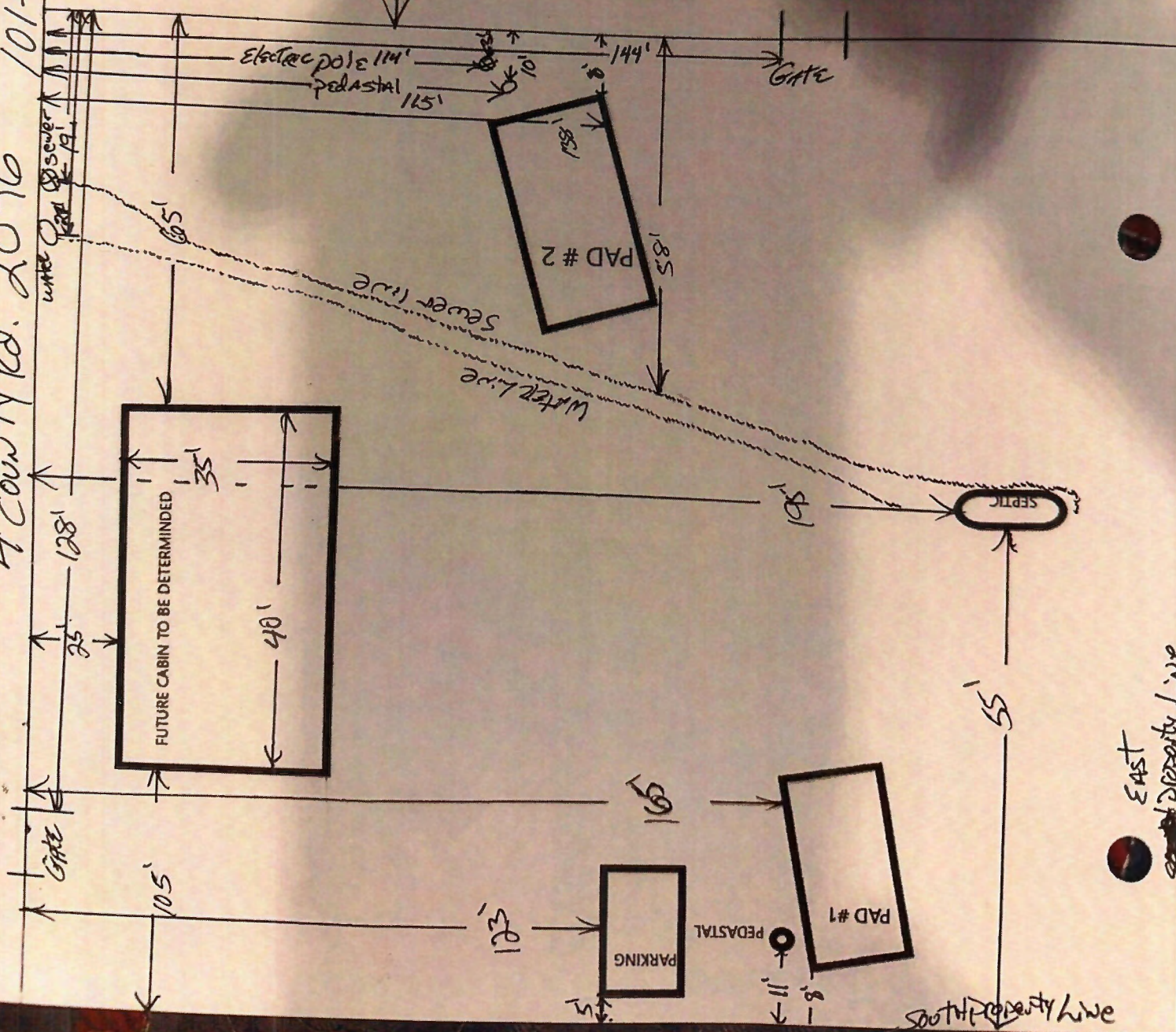
Supervisor _____ Date _____

December 1, 2021

4 County Rd. 2096 / 01-28-029



50' EASEMENT



East 1st St
County Property Line

South Property Line

