

Sanders County Land Services

Building for Lease or Rent Application Form

Applicant Information

- Applicant Name: _____
- Mailing Address: _____
- City, State, ZIP: _____
- Phone Number: _____
- Email Address: _____

Designated Representative (if applicable)

- Representative Name: _____
- Mailing Address: _____
- City, State, ZIP: _____
- Phone Number: _____
- Email Address: _____

Property Information

- Property Owner (if different): _____
- Physical Address of Property: _____
- Legal Description (attach if needed): _____
- Geocode: _____

Submittal Checklist

Include the following information with your application. Check each item as applicable:

Required Item	Attached N/A	
a. Copy of the deed or other legal description of the real property	<input type="checkbox"/>	<input type="checkbox"/>
b. Evidence of landowner's title and interest in the land	<input type="checkbox"/>	<input type="checkbox"/>
c. Title report or subdivision guarantee (not over 90 days old)	<input type="checkbox"/>	<input type="checkbox"/>
d. Site plan, drawn to scale, showing the following:	<input type="checkbox"/>	<input type="checkbox"/>
I. North arrow and scale bar (minimum 1:20)	<input type="checkbox"/>	<input type="checkbox"/>
II. Property boundaries with dimensions noted	<input type="checkbox"/>	<input type="checkbox"/>
III. Existing and proposed onsite and adjacent offsite streets, roads, and easements	<input type="checkbox"/>	<input type="checkbox"/>
IV. Existing and proposed access to the property	<input type="checkbox"/>	<input type="checkbox"/>

Required Item	Attached N/A	
V. Pertinent geographic features, including floodplain	<input type="checkbox"/>	<input type="checkbox"/>
VI. Location of existing and proposed water, wastewater, and solid waste facilities	<input type="checkbox"/>	<input type="checkbox"/>
VII. Location of existing and proposed buildings or structures	<input type="checkbox"/>	<input type="checkbox"/>
VIII. Location of existing and proposed outdoor lighting	<input type="checkbox"/>	<input type="checkbox"/>
IX. Location of existing and proposed stormwater management and drainage	<input type="checkbox"/>	<input type="checkbox"/>
X. Location of existing or proposed utilities, indicating above/below ground	<input type="checkbox"/>	<input type="checkbox"/>
e. Narrative describing existing and proposed buildings and uses (include square footage and ground coverage)	<input type="checkbox"/>	<input type="checkbox"/>
f. Narrative describing proposed water, wastewater, and solid waste disposal facilities	<input type="checkbox"/>	<input type="checkbox"/>
g. Narrative describing emergency medical, fire, and law enforcement services	<input type="checkbox"/>	<input type="checkbox"/>
h. Narrative describing access and onsite circulation	<input type="checkbox"/>	<input type="checkbox"/>
i. Narrative assessing environmental and population impacts and mitigation measures	<input type="checkbox"/>	<input type="checkbox"/>
j. Comments received from required reviewing entities (list below)	<input type="checkbox"/>	<input type="checkbox"/>
k. Other information necessary for compliance (as applicable):		
I. Stormwater management plan	<input type="checkbox"/>	<input type="checkbox"/>
II. Landscaping, buffers, and/or fence plans	<input type="checkbox"/>	<input type="checkbox"/>
III. Dust control plan	<input type="checkbox"/>	<input type="checkbox"/>
IV. Maintenance plan for shared infrastructure	<input type="checkbox"/>	<input type="checkbox"/>
V. Elevation views of all structures	<input type="checkbox"/>	<input type="checkbox"/>

Required Commenting Entities

Please attach or provide documentation of comments from the following (if applicable):

- ☐ Sanders County Road District Foreman
- ☐ Montana Department of Transportation
- ☐ City/Town Public Works or Street Department
- ☐ Emergency Medical Services Provider
- ☐ Local Fire Protection Authority
- ☐ Law Enforcement Service Provider
- ☐ Local School District (if residential buildings are proposed)
- ☐ State Historic Preservation Office or Tribal Preservation Office (CSKT)

Variance Request (if applicable)

If a variance from any design or development standard of the Sanders County Building for Lease or Rent Regulations is requested, please describe the variance below and attach a written justification, including supporting documentation.

Variance Description: _____

Variance Request Attached: ☐ Yes ☐ No

Certification and Authorization

By signing below, I hereby certify that all information submitted with this application is true and correct to the best of my knowledge.

Authorization Statement:

An application for the creation of a building for rent or lease shall be submitted to the Administrator and shall be accompanied by payment of all fees established for its review. Submission of a signed application constitutes authorization for representatives of Sanders County and its authorized agents to enter the property for routine monitoring and inspection during the review process. All site visits may be coordinated in advance with the applicant, and access shall occur only following such coordination. **Failure to provide access to the property when requested may result in delays in the processing or approval of the application.*

Applicant Signature: _____

Date: _____

Owner Signature (if different): _____

Date: _____

For Official Use Only

Date Received: _____

Received By: _____

Fee Amount: _____

Check/Cash/Card #: _____