



GALLATIN COUNTY

Condo Declaration Exemption Application

1. Applicant(s)

a. Declarant Name _____

Address _____ Phone _____

Email _____

b. Authorized Representative Name _____

Address _____ Phone _____

Email _____

2. Parcel(s)

Physical Address _____

Section _____ Township _____ Range _____

Other legal description _____

Zoning District _____ Zoning Designation _____

Subdivision _____ Lot _____ Block _____

Assessor Parcel # **R** _____

DOR# **06** _____
(2) (4) (2) (1) (2) (2) (4)

How and when was the parcel created (example: COS 999, 5/1/92) ? _____

3. Attachments

A Copy (not original) of the Completed Final Condominium Declaration.

An 11 x 17 copy of the subdivision plat or Certificate of Survey depicting the parcel(s) as recorded in the Clerk and Recorder's Office.

4. If parcel is in a Zoning District

A copy of all issued Land Use Permit(s) for the condominium development or reference to County LUP number(s).

—AGREEMENT—

The undersigned authorized representative of the Declarant hereby certifies that the information submitted in this application is true and correct.

Signature

Date