



ID# \_\_\_\_\_

# PROPERTY INFORMATION REQUEST FORM

PLEASE NOTE THAT THE GIS DEPARTMENT AND GALLATIN CITY COUNTY HEALTH DEPARTMENT MAY REQUIRE A COMPLETED COPY OF THIS FORM PRIOR TO ISSUING AN ADDRESS, LICENSE OR PERMIT. PLEASE DISCUSS YOUR PROPOSED PROJECT WITH THE HEALTH DEPARTMENT (582-3120), COUNTY ROAD & BRIDGE DEPARTMENT (582-3250) AND STATE BUILDING CODES BUREAU (841-2069) TO LEARN ABOUT OTHER APPROVALS THAT MAY BE NECESSARY FOR YOUR PROJECT.

Requester Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Mailing Address \_\_\_\_\_

Landowner Name \_\_\_\_\_ Phone \_\_\_\_\_

Site Address/Road Name \_\_\_\_\_ Geocode: 06- \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Subdivision/COS# \_\_\_\_\_ Lot/Tract/Parcel \_\_\_\_\_ Block \_\_\_\_\_

Legal Description \_\_\_\_\_ ¼ \_\_\_\_\_ ¼ Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_

Description of Existing Buildings on Property \_\_\_\_\_

Description of Proposed Project: Single-Family Multi-Family Commercial/Industrial Mixed Use  
Other (please describe) \_\_\_\_\_

BY SIGNING BELOW, THE ABOVE NAMED LANDOWNER OR REQUESTER HEREBY ACKNOWLEDGES THAT COMPLIANCE WITH APPLICABLE COUNTY REGULATIONS, INCLUDING BUT NOT LIMITED TO OBTAINING ANY NECESSARY PERMITS/APPROVALS PRIOR TO COMMENCING THE ACTIVITY FOR WHICH THE PERMIT/APPROVAL IS REQUIRED, IS MANDATORY AND THE RESPONSIBILITY OF THE LANDOWNER.

\_\_\_\_\_  
*Landowner or Requester Signature* *Date*

*Printed Name* \_\_\_\_\_

<b>THIS SECTION TO BE COMPLETED BY PLANNING DEPARTMENT BASED ON REGULATIONS IN EFFECT ON DATE FORM IS COMPLETED</b>	
<b>A. Other Planning Jurisdiction</b>	<b>YES</b> – If Yes, see sections A. & C. <b>NO</b> – If No, see Sections B. & C. Prior to construction, the Landowner is required to contact the jurisdiction below to determine whether the project is subject to review under Zoning, Subdivision & Platting Act or Building by Lease or Rent regulations: City of Belgrade (388-4994)      Town of Manhattan (284-3235)      Three Forks (285-3431) Other _____
<b>B. Zoning</b>	Property is located in a County zoning district and subject to zoning regulations      YES      NO If "YES", name of zoning district: _____ Zoning-related permits/approvals are required prior to commencing construction of project      YES      NO <b>Subdivision &amp; Platting Act</b> The above project appears to require review under the Subdivision Regulations      YES      NO <b>Building by Lease or Rent</b> The above project appears to require review under the Building by Lease or Rent Regulations      YES      NO
<b>C. Floodplain</b>	At least a portion of the above property appears to be located in the 100-year floodplain as mapped by FEMA and is subject to the Floodplain Regulations. Landowner is advised to submit a Floodplain Information Request Form to obtain more detailed information.      YES      NO
<b>Other Comments:</b>   	
_____ <i>Planning Department Signature</i> <span style="float: right;"><i>Date</i></span> <i>Printed Name</i> _____	