

FRONTDESK PLANNER REQUEST

CANYON COUNTY DEVELOPMENT SERVICES DEPARTMENT

111 North 11th Avenue, #310, Caldwell, ID 83605

zoninginfo@canyoncounty.id.gov Phone: 208-454-7458 Fax: 208-454-6633



REQUIRED CUSTOMER INFORMATION:		DATE:
Provide Parcel # and /or Property Address Case # if applicable	PARCEL #(s):	
	PROPERTY ADDRESS:	
	APPLICATION/CASE #:	<input type="checkbox"/> NA

Name:	
Email Address:	
Phone #:	
Mailing Address:	

How can we help you today? Please tell us what your questions are or what information you are seeking.

- | | |
|--|--|
| <input type="checkbox"/> Zoning designation | <input type="checkbox"/> Private Roads and Driveways |
| <input type="checkbox"/> Comprehensive Plan Designation | <input type="checkbox"/> Building set-backs/height/size |
| <input type="checkbox"/> Land Uses Available (§07-10-27) | <input type="checkbox"/> Existing Application questions [Case # _____] |
| <input type="checkbox"/> Property Boundary Adjustment | <input type="checkbox"/> Questions about submitting an application (new) |
| <input type="checkbox"/> Building Permit Questions | <input type="checkbox"/> OTHER: _____ |

Describe question, issue, concern: _____

Note: Staff will make initial contact within three business days of receipt of the form. Additional information may be required or you will be directed to an alternate process such as a parcel inquiry application.

STAFF NAME:	DATE:
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Zoning: _____ Comprehensive Plan _____ Acreage: _____

Existing Parcel Inquiry? No Yes Case File #: _____

PARCEL INQUIRY application is required for this request. No Yes, further research required

- | | |
|---|---|
| <input type="checkbox"/> Building permit available? | <input type="checkbox"/> Other property/entitlement research required |
| <input type="checkbox"/> Land division available? | <input type="checkbox"/> _____ |

STAFF COMMENTS:
