

**FARM DWELLING APPLICATION**  
**POLK COUNTY COMMUNITY DEVELOPMENT DEPARTMENT**  
**PLANNING DIVISION**

This information completed by staff

Checked By: _____	FEE: Farm Operator on High Value	\$
Received By: _____	Farm Operator on Other-Acreage/Income/Sales	\$
Date Submitted: _____	Lot-of-Record on Other Farmland	\$
Fee Paid: _____	Family Farm Help Dwelling	\$
Application #: _____	Lot-of-Record on High Value	\$
Receipt #: _____	Small Tract Dwelling on High Value	\$
_____ Measure 37 Order Number (attached)	Farm Operator on Other Farm Land	\$
_____ Measure 37 State Order (attached)	Accessory Farm Dwelling	\$
<b>Total:</b>		<b>\$</b>

The following sections are to be completed by applicant. Please type or clearly print all information below. An incomplete application cannot be accepted.

**I.) APPLICANT**

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone: Hm: \_\_\_\_\_ Wk: \_\_\_\_\_  
 Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_

**II.) OWNER(S)**

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone: Hm: \_\_\_\_\_ Wk: \_\_\_\_\_  
 Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_

**III.) PROPERTY:**

Location or Address \_\_\_\_\_ Tax Acct. No. \_\_\_\_\_ Acreage \_\_\_\_\_  
 Township \_\_\_\_\_; Range \_\_\_\_\_; Section(s) \_\_\_\_\_; Taxlot(s) \_\_\_\_\_  
 Comp Plan Designation \_\_\_\_\_ Zone \_\_\_\_\_  
 Previous action(s) involving the subject property, (For example, conditional use, variance, etc.):  
 \_\_\_\_\_  
 \_\_\_\_\_

**IV.) PUBLIC SERVICE AND UTILITIES INFORMATION:**

A. School District: \_\_\_\_\_ B. Fire District: \_\_\_\_\_  
 How will the following be provided for the proposed use? If applicable please provide documentation.  
 C. Water Service Type: \_\_\_\_\_ D. Sewage Disposal Type: \_\_\_\_\_

**V.) WRITTEN REQUEST:** (Example, "To establish a small tract template dwelling in the TC Zoning District.")

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**VI.) FARM DWELLING APPLICATION CHECKLIST**

In all land use actions, the “burden of proof” is on the applicant. It is important that you provide information, which clearly describes the nature of the request and indicates how the proposal meets all the criteria within the Zoning Ordinance.

The information requested below is required at the time you submit your application. The processing of your application does not begin until the application is determined to be complete. An incomplete application will postpone the decision, or may result in denial of the request. *(Please mark the items below to ensure your submittal is complete)*

- A.) A written statement of intent, attached to this application, with necessary supporting evidence which fully and factually describes the following:
  - 1.)\_\_\_\_\_ A complete explanation of how the request complies with provisions and criteria in the Zoning Ordinance. A planner will explain which sections of the Ordinance pertain to your specific request. You must address each of the Ordinance criterion, on a point-by-point basis in order for this application to be deemed complete.
  - 2.)\_\_\_\_\_ A description of the property in question, including, but not limited to the following: size, vegetation, crops grown, access, existing buildings, topography, etc.
  - 3.)\_\_\_\_\_ A complete description of the request, including any new structures proposed.
  - 4.)\_\_\_\_\_ If applicable, documentation from sewer and water district showing availability for connection.
  
- B.) A plot plan of the property. Examples are available from the Community Development Department. Indicate the following on your plot plan:
  - 1.)\_\_\_\_\_ Location of all existing and proposed buildings and structures
  - 2.)\_\_\_\_\_ Existing County Road, public right-of-way or other means of legal access
  - 3.)\_\_\_\_\_ Limits of 100-year floodplain elevation (if applicable)
  - 4.)\_\_\_\_\_ Vegetation on the property
  - 5.)\_\_\_\_\_ Location of any outstanding physical features
  - 6.)\_\_\_\_\_ Location and description (paved, gravel, etc.) of vehicular access to the dwelling location
  
- C.) A copy of the Land Use Action which created the parcel (subdivision plat, partition plat, lot line adjustment, or if prior to May 15, 1974 provide a copy of deed) provide current deed with legal description. Copies may be obtained at the Polk County Clerk's Office.
  
- D.) A current print-out from the Polk County Assessors Office for each taxlot subject to the proposed land use action.

**I certify that this application and its related documents are accurate to the best of my knowledge. I am aware that there is a twelve (12) day appeal period following the date of the Planning Director’s decision of this land use action. I understand that the signature on this application authorizes representatives of the Polk County Community Development Department to enter upon the subject property to gather information pertinent to this request. If the application is signed by an agent, the owner's written authorization must be attached.**

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**Signatures of Owners that appear on deed and/or Authorized Agent  
\*If signed by an agent, owner’s written authorization must be attached.**

**PLEASE NOTE: THIS APPLICATION MUST BE RETURNED IN PERSON. MAIL-IN APPLICATIONS CANNOT BE ACCEPTED.**