



MORGAN COUNTY
PLANNING, ZONING & BUILDING DEPT.
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 Fort Morgan, Colorado 80701
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Filing Deadline _____

Meeting Date _____

APPLICATION FOR VESTING OF RIGHTS

APPLICANT

LANDOWNER

Name _____

Name _____

Address _____

Address _____

Phone () _____

Phone () _____

TECHNICAL INFORMATION

Address of property or general location _____ Zone District _____

Size of property (Sq.Ft. or Acres) _____ Present Use of Property _____ Proposed Use of Property _____

Complete Legal Description of property. If not enough space, attach to application and label "Exhibit 2". _____

Is property located within 1320' (1/4) of a livestock confinement facility? _____

APPLICANT'S STATEMENT

I certify that the information and exhibits I have submitted are true and correct to the best of my knowledge. Applicant must be signed by landowner.

_____ Date _____ Date _____

STAFF USE ONLY: Date received _____ Received by _____ Fee Payment _____ Check # _____ <div style="text-align: right; margin-top: 5px;">Fee Payment By _____</div>
Other permits required _____
Comments _____