CITY OF EAGLE
660 E. Civic Lane, Eagle, ID 83616
Phone#: (208) 939-0227 Fax: (208) 938-3854

DESIGN REVIEW ONE YEAR EXTENSION OF TIME APPLICATION

(Eagle City Code 8-2A-15)

FILE NO.:		FEE:	
CROSS REF. FILES:			

APPLICANT: _____ PHONE: _____

☐ Owner ☐ Purchaser ☐ Tenant

APPLICANT ADDRESS: _____

APPLICANT EMAIL: _____

OWNER: _____ PHONE: _____

OWNER ADDRESS: _____

OWNER EMAIL: _____

REPRESENTED BY
(IF DIFFERENT FROM ABOVE): _____ PHONE: _____

REPRESENTATIVE EMAIL: _____

REPRESENTATIVE ADDRESS: _____

LOCATION OF SITE SUBJECT OF THIS APPLICATION: _____

A maximum twelve (12) month extension of the time limit of an approved design review application may be approved by the City Council, at its sole discretion, if the following findings are made. A written statement addressing each issue below in the order outlined shall be submitted with this application.

A. No outstanding city code or design review conditions of approval violations exist on the subject property. If such violations exist, they may be conditions by the City Council to be cured as a condition of the extension of time;

B. The design review application, as previously approved, remains in the best interests of the health, safety, and general welfare of the city;

C. There have been no significant changes to city code between the date of application approval and the application date of the time extension request that would require substantial modifications to the project;

D. There are no hazardous situations which have developed or have been discovered on the project site;

E. The public facilities and services required for the project remain adequate;

F. The applicant has provided a viable and acceptable plan which demonstrates how the completion of the design review application will commence within the year; and

G. The applicant has provided a schedule that depicts the anticipated progress for completion of the design review application within the year.

The City Council reserves the right to revoke the extension of time approval if it finds that any of the criteria herein are not met.

This section does not limit the number of extensions the City Council may grant to an application so long as the criteria set forth in section 8-2A-15(A)(1) are met. Nothing in this ordinance requires the city council to grant any extension of an approval period.

NOTE: INDEMNIFICATION CLAUSE, ATTACHED TO THIS DOCUMENT, MUST BE EXECUTED AND ACCOMPANY THIS APPLICATION.

_____

APPLICANT SIGNATURE

_____

APPLICANT PRINTED NAME

CITY OF EAGLE

INDEMNIFICATION AGREEMENT CLAUSE
FEE SCHEDULE FOR LAND USE PLANNING ACTIONS

The City does not guarantee acquisition of public services provided by any agency. The developer, property owner and/or applicant of this Extension of Time application does hereby release and indemnify and hold harmless the City of Eagle from any and all claims, cost, damages, etc., from any individual or organization regarding the acquisition of services which are not affiliated with the City, including but not limited to, central water service, sanitary sewer service, access to public roads and fire protection. "Regulatory Taking Notice: Applicant has the right, pursuant to section 67-8003, Idaho Code, to request a regulatory taking analysis."

City of Eagle Applications:
Eagle City Code Section 1-7-4 (A) states, "Fee Schedule Established - The City Clerk, at the time of the filing of an application for a land use planning action within the City limits, shall collect the fee for such action established through a resolution of the City Council, **together with any direct costs incurred by the City in obtaining a review of the application, by architects, engineers or other professionals** necessary to enable the City to approve or disapprove the application in an informed manner."

1. The fees established by resolution, as noted in 1-7-4 (A) above, is attached.

2. Direct costs, as underlined in 1-7-4 (A) above, shall be required to be paid by the applicant in a time frame to be determined by the Zoning Administrator. Processing of an application may be delayed if the direct costs are not reimbursed as required.

Applicant signature _____ Date_____

Printed name of Applicant _____ Date_____

Application Description/Number_____