CITY OF IONA
3548 N. Main Street (208) 523-5600
Iona, Idaho 83427 cityclerk@cityofiona.org

APPLICATION FOR ORIGINAL ZONING, REZONING, CONDITIONAL USE PERMIT, OR VARIANCE

Iona City Code § 11-1-10 [Application Fee: $150]

Type of Action Sought: ☐Original Zoning to _____ ☐Rezoning to _____ ☐Conditional Use Permit (Iona City Code 11-8-1 *et seq.*) ☐Variance (Iona City Code 11-14-1 *et seq.*)

APPLICANT INFORMATION

Applicant's Full Name: _____

Applicant's Mailing Address: _____

Is the Applicant the owner of the Property? ☐Yes ☐No (If, no, please include owner's consent, below)

PROPERTY INFORMATION

Subject Property (*attach pages if necessary*): _____

_____

Most Recent Deed Conveying the Property recorded in Bonneville County as Instrument #_____

Current Zone of Property: ☐A ☐R-A ☐R-1 ☐R-T ☐R-2 ☐C ☐I

Please explain the basis for the zoning action you seek (*attach pages if necessary*): _____

_____

_____

I certify (or declare) under penalty of perjury pursuant to the law of the State of Idaho that the foregoing is true and correct.	
Signature:	Date:

OWNER'S CONSENT (if applicant is not the property owner)

I, _____, own the real property that is the subject of this Application. I hereby consent to this Application and the proposals herein.

Dated: _____ Signed: _____

OFFICE USE ONLY

Accepted by: _____ Date: _____

☐$150 Fee Received Permit Number: ZONE-_____

☐All Attachments Received Commission Meeting: _____

☐All Notice Provided Council Meeting: _____