



IVINS CITY

55 N. Main St. Ivins, UT 84738
Tel. 435-628-0606 Fax 435-674-5486
www.ivins.com



Rec'd By:	<u>KB</u>
Filing Fee:	<u>\$ 1000 -</u>
Receipt #:	<u>178995</u>
Date:	_____
Code: 403	

PRELIMINARY PLAN APPLICATION

Please print clearly above the line. If the application and checklist are not complete, the application will be returned to the applicant.

Fee: \$500 + \$20 per lot plus \$940.00+ labels
Mailing Fee: \$.75 per mailing label (126 - \$34.50 owing)



Shadow Canyons Phase 3 of Ivins
Subdivision Name

Gary Nelson
Applicant/Agent

I-SB-61-A-2 & I-SB-64-D
Tax ID

208-731-5030
Phone Fax

Saddleback Land Development Inc
Property Owner

6.77 22 R-1-10
Acreage Lots Zone

PO Box 6004, Twin Falls, ID 83303
Address of Property Owner

500 South Main Street
Address of subject property

APPLICANT AFFIDAVIT

I, Gary Nelson, do hereby say that I am the owner/agent of the subject property of this application. The statements, information, exhibits and any and all plans herein or attached or submitted present the intentions of the applicant and are in all respects true and correct to the best of my knowledge and belief. I do hereby agree to pay all adopted and customary fees of Ivins City relating to this application.

Gary Nelson
Signature of applicant

4-1-16
Date

Gary Nelson
Signature of property owner

4-1-16
Date

Date received:
Ker Rudd

Application complete:
4/14/16

Signature of Building and Zoning Administrator

Date