


TOWN OF VIRGIN
114 S Mill Street
PO Box 790008
Virgin, Utah 84779
(435) 635-4695

TOWN USE ONLY
Filing Fee: \$400.00 (non-refundable)
CONDITIONAL USE PERMIT: Level 1 or Level 2
Date Paid/Received: _____
Check #: _____ Staff Initials: _____

CONDITIONAL USE PERMIT

File Date: 3/8/2023 **Staff Approval:** _____ **Date:** _____

Zone Classification of Property: ☒ Commercial ☐ Residential ☐ Rural Residential
☐ Agricultural ☐ Resort Zone ☐ Highway Resort Zone

APPLICANT INFORMATION:

Name: Kirk Barker - Ensign Hospitality

Address _____

Phone: Home: _____ Work: _____ Cell: _____

Email Address: kirk@ensignhospitality.com

Property Address: State Route 9 & Mesa Road Parcel F-1 (See attached Survey)

Property Tax ID number: V-2-1-21-20001 (attached legal description)

Narrative of the project and use of the land: _____

A new 2-story 72 unit multi-family project with exterior stairs and breezeways. The project will be separated into three separate 24-unit buildings with surface parking.

List all permits that may be required by state or federal agencies:

****Have all the prerequisites of chapter 16 of VULU been met?** ☒ Yes ☐ No

The Conditional Use Permit once granted, and from final date of approval must coincide with the building permit timeline and no Certificate of Occupancy will be issued without all conditional uses being met.

WHEN A CONDITIONAL USE PERMIT IS GRANTED SUBJECT TO CONDITIONS, SUCH CONDITIONAL USE PERMIT DOES NOT BECOME EFFECTIVE UNTIL SUCH TIME AS THOSE CONDITIONS HAVE BEEN MET AND APPROVED BY ZONING ADMINISTRATOR AND/OR PLANNING COMMISSION AND TOWN COUNCIL.

*NOTE – A Conditional Use Permit does not eliminate the necessity of obtaining a Building Permit or Business License. A Building Permit is required for construction of all buildings in the project.

IF REQUIRED, APPLICANT MUST SUBMIT STAMPED, ADDRESSED ENVELOPES FOR ALL PROPERTY OWNERS WITHIN 300FT OF THE AFFECTED PROPERTY 10 DAYS BEFORE THE PUBLIC HEARING.

Applicant Signature: *[Signature]* Date: 3-8-23

TOWN USE ONLY

CUP Level: Level 1 Level 2

Original Permit Date: _____ Establishment Deadline: _____

APPROVAL BY ZONING ADMINISTRATOR: ☐ Approval ☐ Denial Date: _____

Recommended to Planning Commission: N/A ☐ ☐ Approval ☐ Denial Date: _____

Zoning Administrator's Signature: _____ Date: _____

Chairman's Signature: _____ Date: _____

Town Council Decision: N/A ☐ ☐ Approval ☐ Denial Date: _____

Town Council Mayor's Signature: _____ Date: _____

CONDITIONS will be attached to this form and printed on the permit.

Zoning Administrator Signature: _____ Date: _____

Town Clerk's Signature: _____ Date: _____

 NOTARY PUBLIC
SHARLENE C MILLARD
My Commission # 728215
My Commission Expires
February 15, 2027
STATE OF UTAH