



LEWIS AND CLARK COUNTY  
**Community Development and  
 Planning Department**  
**Environmental Services Division**  
 316 NORTH PARK, ROOM 230  
 HELENA, MT 59601  
 (406) 447-8374

A COMPREHENSIVE PERMITTING FORM WILL NOT BE ACCEPTED WITHOUT A COPY OF THE FILED CERTIFICATE OF SURVEY OR A FINAL PLAT (IF LOT IS IN A SUBDIVISION).

COPIES OF THESE DOCUMENTS MAY BE OBTAINED IN THE CLERK AND RECORDER OFFICE ROOM 113 OR WITH THE ASSISTANCE OF

## COMPREHENSIVE PERMITTING FORM

Primary Contact: \_\_\_\_\_ Daytime Telephone: \_\_\_\_\_  
 (Please Print)

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Property Owner(s): \_\_\_\_\_ Daytime Telephone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Property Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

NOTE: An address must be applied for and assigned to your property (if you have not had one previously assigned).

Lot/Tract Size: \_\_\_\_\_ Subdivision Name (if applicable): \_\_\_\_\_

Lot/Tract No: \_\_\_\_\_ TAX CODE: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_

Description of Existing Improvements and All Structures: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

Description of Proposed Project: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

I, \_\_\_\_\_, the Primary Contact, hereby acknowledge that the information supplied

(Please Print)

with this Comprehensive Permitting Form is correct and reflects the current land use at the property address identified above. I further acknowledge that any permit application I submit will require the submission of all documentation regarding easements, setbacks, covenants, zoning, and any other applicable restrictions that may affect the property. I further acknowledge that failure to abide by any easement, setback, covenant, zoning, or any other applicable restriction that may affect the property without prior approval from the proper authority (county, state, federal) may result in the revocation of the permit, the denial of a permit, the removal or disconnection of the improvement, and/or an increase in permit fees.

Primary Contact Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FOR OFFICE STAFF ONLY

COS No: \_\_\_\_\_ FINAL PLAT No: \_\_\_\_\_ DEED No: \_\_\_\_\_ CPF