



Community Development Department
111 North 100 East
Washington City, UT 84780
Phone (435) 656-6325
Fax (435) 656-6371
www.washingtoncity.org

Special Meeting

FOR OFFICE USE ONLY

Receipt # _____
Amount \$ _____
Date Received _____

Name of Subdivision: _____ **Number of Lots:** _____ **Acreage:** _____

Project Location: _____ **Specific Address:** _____

Owner of Property: Name: _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Phone: _____ **Fax:** _____ **E-Mail Address:** _____

Applicant: Name: _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Phone: _____ **Fax:** _____ **E-Mail Address:** _____

Engineer: Name: _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Phone: _____ **Fax:** _____ **E-Mail Address:** _____

CONTACT PERSON FOR PROJECT OF THOSE LISTED ABOVE: _____

Please include with the application:

1. Any information and exhibits that will clarify the reason why the meeting is being held.

Filing Fee: \$50.00

Maps & names of property owners are available at:

Washington County Recorder
87 North 200 East
St. George, Utah 84770
(435)634-5709

Signature of Applicant: _____ **Date:** _____

Signature or Consent of Owner: _____ **Date:** _____