

MORGAN COUNTY PLANNING ZONING & BUILDING DEPT. 231 Ensign, P.O. Box 596 Fort Morgan, Colorado 80701 PHONE (970)542-3526 FAX (970)542-3509

EMAIL: permits\_licensing@co.morgan.us

PERMIT#		
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Date Received / /	Received By	
App Fee <u>\$</u> Ck/CC #:	Paid/ /	
BOCC Date://	_	
100 Year Floodplain? Y/N	Taxes Current? Y/N	
Original SUP #	Resolution #	
Original Approval Date:	/ /	

## WIND, SOLAR, AND BESS RENEWAL PERMIT APPLICATION

APPLICANT			LANDOWNER	
Name		Name		
Address		Address		
Phone ( )			e ()	
Email		Emai	1	
PROPERTY LEGAL DESCRIPTION	N			
Address (if available):				
S:T:R:	1/21/4	1/4	Property Size(sq. ft. or acres)	
Parcel #:			Zone District:	
Subdivisions			I ot #(e):	

SEE REQUIRED ATTACHMENT LIST ON BACK OF THIS PAGE.

INCOMPLETE APPLICATIONS WILL <u>NOT</u> BE ACCEPTED OR PROCESSED.

## SOLAR, WIND, AND BESS RENEWAL PERMIT REQUIRED ATTACHMENT LIST

Fee:	☐ Non-Refundable Application Fee						
	Morgan Count	*Additional fees and charges may be required pursuant to Section 2-160 of Morgan County Zoning Regulations. Applicant will be responsible for any					
	legal fees after	legal fees after the first 5 hours.					
	☐ One Yea applicati	ar Renewal $-33\%$ of the application feed on	for original permit				
		☐ <b>Two Year Renewal</b> – <b>66%</b> of the application fee for original permit application					
	☐ Three Y applicati	<b>Year Renewal</b> – <b>100%</b> of the application on	fee for original permit				
<b>Project Narrative</b> :	: 🗆 Narrative I	ncluding the following:					
	☐ Describe	e the reasoning for a renewal					
	API	PLICANT STATEMENT					
I certify that th	ne information and exh	nibits I have submitted are true and correct to the	best of my knowledge				
	<b>-</b>						
APPLICANT NAME (PRIN	NTED)	APPLICANT SIGNATURE	DATE				