



CITY OF EAST HELENA
306 EAST MAIN STREET
PO BOX 1170
EAST HELENA, MT 59635
PHONE: (406) 227-5321

SKETCH PLAN CHECKLIST

CLASSIFICATION OF SKETCH PLANS: Individual single-household and two-household dwellings each on individual lots; fences; signs in compliance with the zoning ordinance; special temporary uses; and accessory structures associated with these uses. Other similar projects may be determined by the City staff to require only sketch plan review. The City staff shall determine all submittal requirements. All other developments within the City shall be subject to site plan review procedures and criteria, and the applicable submittal requirements.

SKETCH PLAN REVIEW:

1. Separate construction plans are necessary for building permits when the proposal requires such permits.
2. Sketch plans for projects shall be submitted to City staff for a determination of compliance with the requirements of Zoning Ordinance. Once compliance is achieved, the application will be approved for construction or referred to the appropriate permitting authorities.
3. Sketch plans shall be reviewed for compliance with all applicable requirements of the Zoning and the cessation of any current violations of the Zoning, exclusive of any legal nonconforming conditions.
4. This City staff project decision may be appealed filing a notice of appeal with the Clerk of the Council for the City of East Helena, within 4 days after the date of approval as evidenced by the City staff's signature, by following the procedures of Chapter 10, East Helena Zoning Ordinance.

SKETCH PLAN CHECKLIST

| 3 SETS REQUIRED | Yes | No | N/A |
|---|-----|----|-----|
| 1. Development Review Application form. | | | |
| 2. Sketch plan, (no larger than) 11 X 17, north at the top of the page <ul style="list-style-type: none"> • site boundaries/property lines, with accurate lot dimensions; • streets and alley frontages with names and easements; • location of all existing and proposed structures (including decks/porches) with distances to the nearest foot between buildings and from buildings to property lines with accurate building area dimensions; and • drawn to scale with setback measurements clearly labeled and in sufficient detail to demonstrate compliance with the requirements of the Zoning Ordinance. | | | |
| 3. Parking and circulation, driveways. | | | |
| 4. Drainage patterns and watercourses. | | | |
| 5. Floor plans, (no larger than) 11 X 17, including garage, basement, and all finished and unfinished spaces (drawn to scale and/or with outside dimensions clearly labeled). | | | |
| 6. Building elevation plans, (no larger than) 11 X 17 (drawn to scale and/or with measurements clearly labeled). | | | |
| 7. Plans, sketches, pictures, specifications and other data that will clearly express any proposed building alterations or additions. | | | |
| 8. Such other information as may be suggested by the City staff. | | | |
| 9. Clearly marked property corners and proposed building corners with flags, stakes, etc. (including garage and deck/porch). | | | |
| 10. Length of time since current / previous use: | | | |
| 11. Proposed use: | | | |



CITY OF EAST HELENA
306 EAST MAIN STREET
PO BOX 1170
EAST HELENA, MT 59635
PHONE: (406) 227-5321

DEVELOPMENT REVIEW APPLICATION

| | | |
|--------------------------------|-------|-------------|
| 1. Name of Project: | | |
| 2. Property Owner Information: | | |
| Name: | | Email: |
| Mailing Address: | | |
| Phone: | | Fax: |
| 3. Applicant Information: | | |
| Name: | | Email: |
| Mailing Address: | | |
| Phone: | | Fax: |
| 4. Representative Information: | | |
| Name: | | Email: |
| Mailing Address: | | |
| Phone: | | Fax: |
| 5. Street Address of Project: | | |
| 6. Legal Description: | | |
| 7. Project Description: | | |
| 8. Zoning Designation: | | |
| 9. Current Land Use(s): | | |
| 10. Gross Area: | Acres | Square Feet |
| 11. Net Areas: | Acres | Square Feet |

| | | | |
|--|----------------------------|--|--------------------------------|
| 12. Application Type - (√)checklist available: | | | |
| | Sketch Plan (√) | | Zone Map Amendment (ZMA) (√) |
| | Site Plan, Preliminary (√) | | Zone Map Amendment Initial (√) |
| | CUP, Preliminary (√) | | Zoning Text Amendment (√) |
| | Site Plan, Final (√) | | Informal Review |
| | CUP, Final (√) | | Classification of Use |
| | Variance (√) | | Public Agency Exemption |
| | Administrative Appeal (√) | | |

| | |
|------------------|--|
| 13. Attachments: | |
| Yes | |
| | Checklist for Appropriate Application Type (if available). If a Checklist is not available, enough information must be provided to make a proper decision in the matter. No decisions are made for Public Agency Exemption or Informal Review. |
| | Fee (includes both review fee and advertising fee). |
| | Copy of most recent paid tax receipt. |
| | Copy of the deed for the subject property. |
| | Required Number of Sets. |

As indicated by the signature(s) below, the property owner(s), applicant(s) and representative(s) submit this application for review under the terms and provisions of the East Helena Municipal Code. It is further indicated that any work undertaken to complete a development, approved by the City of East Helena shall be in conformance with the requirements of the East Helena Municipal Code and any special conditions established by the approval authority. This development shall be in conformance with building and fire codes including required building and occupancy permits.

| | |
|---|-------|
| I (We) hereby certify that the above information is true and correct to the best of my (our) knowledge. | |
| Property Owner's Signature: | Date: |
| Applicant's Signature: | Date: |
| Applicant's Signature: | Date: |
| Representative's Signature: | Date: |
| Representative's Signature: | Date: |

Use additional pages as necessary to provide all required information.