



PINAL COUNTY
wide open opportunity

PROCEDURE OUTLINE

FOR A PROPOSED SPECIAL USE PERMIT (SUP) IN UNINCORPORATED PINAL COUNTY

1. Submit a **Concept Review Application** for a Concept Review (pre-application) meeting with the Planning Department and other affected County agencies. - *(The Concept Review Application is a separate application prior to applying for a PAD Overlay District).*
2. Hold a **Neighborhood / Community Meeting** per requirements outlined in Section – [2.176.050 (D)] of the PCDSC.
3. Submit a **Special Use Permit Application** with the required supporting documentation.
4. Submit the following fees made payable to Pinal County in accordance with Section [2.151.010(l)(2)a] of the PCDSC:
 - a. 0-499 mail-outs = \$500.00
 - b. 500 or more mail-outs = \$750.00
 - c. With a accompanying zone change= \$500.00
5. Attend **Planning & Zoning Commission Public Hearing** for Commission recommendation to the Board of Supervisors. - *(Time frame is approximately 10 to 15 weeks from application acceptance by the Planning Department).*
6. Attend **Board of Supervisors Public Hearing** for decision. – *(Time Frame is approximately 4 to 8 weeks after Planning & Zoning Commission Public Hearing).*

Applicants should allow 4 to 6 months from the application acceptance by the Planning Department to a decision from the Pinal County Board of Supervisors.

SUPPORTING INFORMATION

1. Provide information as to the use and evidence that it is in accordance with the intent of Section 2.151.010: _____

2. Note any services that are not available to the site. Discuss and improvements of services that would be paid for by the public: _____

3. What is the amount of traffic to be generated (# of trips/day, deliveries/week)? Show ingress/egress on the site plan: _____

4. How many parking spaces are to be provided (employees and customers)? Indicate these parking spaces on the site plan: _____

5. Is there a potential for excessive noise (I.E.; children, machinery) or the production of smoke, fumes, dust or glare with this proposed land use? If yes, how will you alleviate these problems for your neighbors? _____

6. What type of landscaping are you proposing to screen this use from your neighbors? _____

7. What type of signage are you proposing for the activity? Where will the signs be located? _____

8. If the proposed land use involves any type of manufacturing or production process, provide a short synopsis of the processes utilizing diagrams, flowcharts and/or a short narrative: _____

9. Explain how the appearance and operation of the proposed land use will maintain the integrity and character of the zone in which the Special Use Permit is requested: _____

10. Have you discussed possible conditions that may be placed on the permit with the Planning Department? YES NO
11. Do you understand that if a condition is violated, that there is a public process by which your permit may be revoked and declared null and void? YES NO

PROPERTY OWNERSHIP LIST
(required for filing all applications)

Instructions: Print name, address, city, state, zip code and tax parcel number for each property owner within 600 feet of the subject parcel boundary.

Parcel No.: _____
Name: _____
Address: _____
City/ST/Zip: _____

Parcel No.: _____
Name: _____
Address: _____
City/ST/Zip: _____

Parcel No.: _____
Name: _____
Address: _____
City/ST/Zip: _____

Parcel No.: _____
Name: _____
Address: _____
City/ST/Zip: _____

Parcel No.: _____
Name: _____
Address: _____
City/ST/Zip: _____

Parcel No.: _____
Name: _____
Address: _____
City/ST/Zip: _____

Parcel No.: _____
Name: _____
Address: _____
City/ST/Zip: _____

Parcel No.: _____
Name: _____
Address: _____
City/ST/Zip: _____

Parcel No.: _____
Name: _____
Address: _____
City/ST/Zip: _____

Parcel No.: _____
Name: _____
Address: _____
City/ST/Zip: _____

I hereby verify that the name list above was obtained on the _____ day of _____, 20____, at the office of _____, and is accurate and complete to the best of my knowledge.

Signature

Date

Acknowledged before me by _____, on this _____ day off _____, 20____.

(SEAL)

Signature of Notary Public

(If additional copies of this form are needed, please photocopy)

I certify the information included in this application is accurate, to the best of my knowledge. I have read the application and I have included the information, as requested. I understand if the information submitted is incomplete, this application cannot be processed.

Name of Applicant	Address	Phone Number
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Signature of Applicant	E-Mail Address
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Name of Agent/Representative	Address	Phone Number
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Signature of Agent/Representative	E-Mail Address
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The Agent/Representative has the authority to act on behalf of the landowner/applicant, which includes agreeing to stipulations. The agent will be the contact person for Planning staff and must be present at all hearings. Please use attached Agency Authorization form, if applicable.

Name of Landowner	Address	Phone Number
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Signature of Landowner	E-Mail Address
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If landowner is not the applicant, then applicant must submit a signed notarized consent form from the landowner with this application. Please use attached Consent to Permit form, if applicable.

TO BE COMPLETED BY ALL LANDOWNERS OF SUBJECT PROPERTY WHEN LANDOWNERS DO NOT REPRESENT THEMSELVES. Instructions for completing required information are in bold and brackets below lines. If applicant is a company, corporation, partnership, joint venture, trustee, etc., please use the corporate signature block and have the notary fill in the notarization section for corporations not individuals.

AGENCY AUTHORIZATION

TO: Pinal County Planning & Development Services
P.O. Box 2973
Florence, AZ 85132

_____ ***[Insert Name -- If a Corporation, Partnership or Association, Include State of Incorporation]***
hereinafter referred to as "Owner," is/are the owner(s) of _____ acres located at _____,
[Insert Address of Property]
and further identified as assessor parcel number _____ and legally
[Insert Parcel Number]
described as follows:

Legal Description is attached hereto as Exhibit A

Said property is hereinafter referred to as the "Property."

Owner hereby appoints

_____ ***[Insert Agent's Name. If the Agent Is a Company, Insert Company Name Only]***
hereinafter referred to as "Agent," to act on Owner's behalf in relation to the Property in obtaining approvals from Pinal County for any necessary amendment to Pinal County's Comprehensive Plan; zone changes; planned area development overlay districts; platting of the subject property; special use permit or industrial use permit; and to file applications and make the necessary submittals for such approvals.

Owner consents and agrees to be bound by all stipulations agreed to by this Agent in connection with any of above-referenced processes.

[Individual PROPERTY OWNER signature block and acknowledgment. DO NOT SIGN HERE IF SIGNING AS AN OFFICER OF A CORPORATION ON THE NEXT PAGE.]

[Signature]
Dated: _____

[Signature]
Dated: _____

STATE OF _____)
) ss.
COUNTY OF _____)

The foregoing instrument was acknowledged before me this ____ day of _____, _____
By _____
[Insert Name of Signor(s)]

My commission expires _____

Notary Public

APPLICATION CHECKLIST

FOR A PROPOSED SPECIAL USE PERMIT (SUP) IN UNINCORPORATED PINAL COUNTY

A. Hold a Neighborhood/Community Meeting:

- 1. Notify all property owners within 1200' (feet)
- 2. Hold the meeting within five (5) miles of the subject property
- 3. Hold the meeting between 5:00 pm – 9:00 pm
- 4. Include with the application the following:
 - a. Copy of Notice of Neighborhood/Community Meeting
 - b. List of property owners notified - (*Use page 5 of this application*)
 - c. Minutes of the meeting
 - d. Attendance sign-in sheet with names & addresses

B. Submit a completed “Agency Authorization” and/or “Consent to Permit” form (if applicable).

C. Submit a written Narrative concerning the proposed development to include:

- 1. Title Page
- 2. Purpose of Request
- 3. Description of Proposal
 - a. Nature of the Project
 - b. Proposed Land Use
 - c. Conformance to adopted Comprehensive Plan
 - d. Special circumstance or conditions applicable to the location of the property, which would make the proposed special use appropriate on this property, though not in the zoning district at large.
 - e. Impact on:
 - 1) Traffic
 - 2) Nearby Properties
 - 3) Health & Safety of persons residing or working in the area.
 - f. Answers to the questions from the **Supporting Information** sheet.
- 4. Location & Accessibility

- 5. Information Addressing the factors listed for consideration in section 2.151.010(N) of the PCDSC.
- 6. Utilities & Services
- 7. Neighborhood Meeting Information
- 8. Appendix (*as applicable*)



D. Submit a Site Plan. The submittal shall be professionally prepared (*by a surveyor, architect, or other design professional*) and drawn at a sufficient scale as to not exceed a print size larger than 11" X 17". The lettering shall be of sufficient size to be legible when reduced to an 8½" X 11" print and include:

- 1. Legal description of total site.
- 2. Name(s) of Landowner(s), Developer, Applicant and Person or Firm preparing plan.
- 3. North Arrow, Scales (*written and graphic*), Preparation Date and Subsequent Revision Dates.
- 4. Location of all Existing & Proposed Structures & Buildings
- 5. Location of all Existing & Proposed Utilities with Location & Width of Associated Easements.
- 6. All Existing & Proposed Public and/or Private Streets with Location & Width of Associated Easements & Right-of-Ways.
- 7. All Points of Ingress & Egress.
- 8. Location & Types of Existing & Proposed Landscaping.
- 9. Indicate Location, Type, Height, & Materials for Proposed Walls, Fences & Signs.



E. Submit a list of all property owners within 600' (feet) of the subject property boundary showing name, mailing address and tax parcel numbers. This list must be obtained within 30 days prior to application submission. A map showing the 600' boundary and parcels must be included as well (*A Tax Assessor Parcel Map is acceptable*). - (*This list is a separate list from the "Neighborhood/Community Meeting list of 1,200' however use Page 5 of this application as well*).



F. Aware that earth fissure maps are available online from the Arizona State Geologic Survey.



G. Submit the Non-Refundable fees for a Special Use Permit as follows

- 1. Special Use Permit Application or application in conjunction with Zone Change= \$500.00
- 2. Special Use Permit Application (500+ mail-outs) = \$750.00

- H. **Submit one (1) hard copy** of all documentation outlined in the SUP application and one **(1) digital copy** in a multi-PDF format per item of the application with all supporting documentation on **one (1) CD**.
- I. **A Install Broadcast Notification Sign(s) on the site in conformance with the information shown in this application.** *(See page 15 & 16 of this application for illustrative details).*
- J. Signature at the end of the **“Checklist”** stating you have reviewed and addressed all areas within it.

I certify that I have submitted all the required information listed above, and I understand that this application for a Special Use Permit cannot be processed until all required information is submitted.

Signature

Date

**SPECIAL USE PERMIT
TITLE 2, CHAPTER 151, SECTION 010
(2.151.010)**

The Planning and Zoning Commission and the Board of Supervisors may, as a conditional use, authorize the location of the following structures of uses in a zoning district from which they are prohibited, when found to be in the best interest of the general public as well as the County.

The following list of special uses is for consideration only for the following zoning districts: SR, SH CAR, GR, CR-1A, CR-2, CR-3, CR-4, CR-5, TR, CB-1, CB-2, CI-B, CI-1, CI-2, MH, RV, MHP, and PM/RV:

- a. Airport, Heliport or Landing Field;
- b. Amusement Park or Outdoor Theater;
- c. Cemetery or Mausoleum;
- d. Circus or Carnival Grounds;
- e. Community Building or Recreational Field;
- f. Hospital, Clinic or Institution: Nursing Home ,Convalescent Home, Group Home of eleven or more residents and Assisted Living Center. An Assisted Living Center is defined as a residential care institution that provides or contracts to provided supervisory care services, or directed care services for eleven or more residents. No such Nursing Home, Convalescent Home, Group Home, or Assisted Living Center shall be located on a lot with a property line within 1,200 feet, measured in a straight line in any direction, of the lot line of another such facility;
- g. Medical Marijuana Dispensary. A Medical Marijuana Dispensary is permitted as a conditions use subject to the conditions as set out in Pinal County Development Services Code Chapter 2.191;
- h. Medical Marijuana Off-Site Dispensary Cultivation Location. A Medical Marijuana Off-Site Cultivation Location is permitted as a conditional use subject to the following conditions as set out in Pinal County Development Services Code Chapter 2.191;
- i. Medical Marijuana Food Establishment. A Medical Marijuana Food Establishment is permitted as a conditional use subject to the conditions as set out in Pinal County Development Services Code Chapter 2.191;
- j. Privately and Commercially operated recreational lake, swimming pool or tennis court;
- k. Public or Governmental Buildings;
- l. Race Track;
- m. Signs;
- n. Sports Arena;
- o. Stable;
- p. Zoo, Public or Private; and
- q. Such other uses as the Planning Commission may deem appropriate in the public interest.

** Special uses for zoning districts RU-1-, RU-5, RU-3.3, RU-2, RU-1.25, R-43, R-35, R-20, R-12, R-9, R-7, MD, MR, AC-1, AC-2, AC-3, O-1, O-2, C-1, C-2, C-3, I-1, I-2, I-3, MH-8, MH-435, PM/PV-435 will be found under the specific zoning district. If a special use is not listed in a specific zoning district, it is prohibited.

Pinal County

Proposed Wireless Communications Facilities

Additional Information Required for Special Use Permit Applications

The following information and documentation shall be provided with every application for a Special Use Permit for a Wireless Communications Facility:

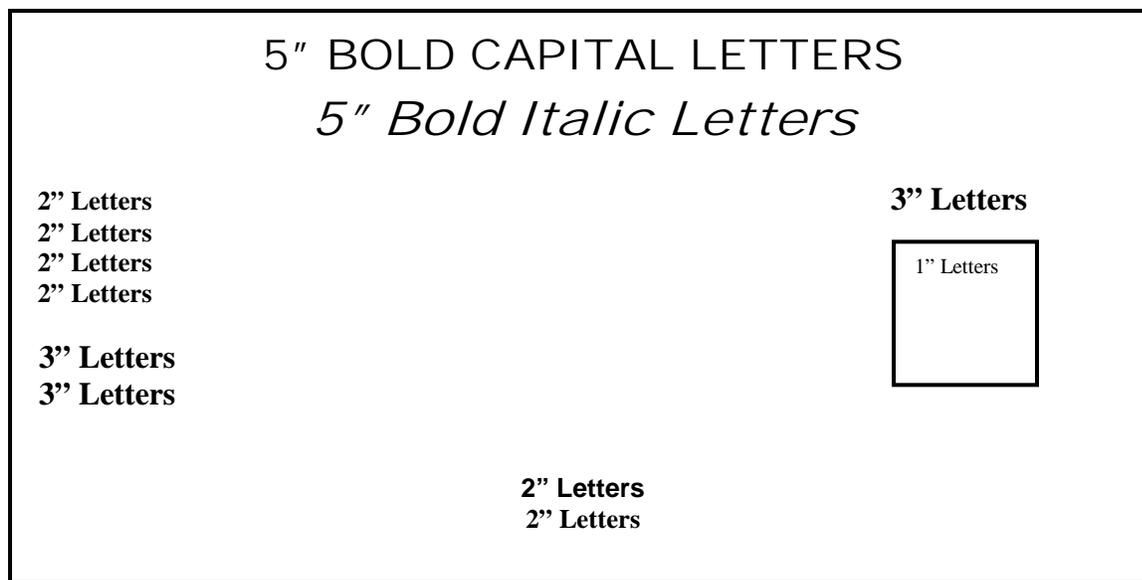
1. A map that shows all other wireless communications monopoles or towers, and their heights, regardless of ownership, within two miles of the proposed site.
2. A written narrative which describes any neighborhood opposition, either written or verbal, received by the applicant.
3. A scale elevation drawing which shows the height and configuration of the monopole or tower, including the location of the antennas.
4. A scale site plan which shows the width of the antenna array, access to the site, parking and any ground based equipment.
5. A description of the proposed color for the antennas and for the monopole or tower.
6. A description of possibilities for camouflage that have been explored, and why the proposed option was chosen.
7. A description of alternative sites that have been explored.
8. A description of the possibility for co-location on existing monopoles, towers, or electrical poles and towers that have been explored.
9. A description of possibilities for using a greater number of shorter monopoles or towers in place of the proposed facility.
10. Information on provisions for removal of the monopole or tower after it is no longer being used.
11. Information on the willingness of the landowner and the service provider to allow other service providers to co-locate on the proposed facility.
12. A description of potential gaps that could impede the provision of emergency services if this monopole or tower is not approved.
13. Certification from an Engineer that the tower will meet the International Building Code.

Pinal County Broadcast Notification Signs: Zoning, Planned Area Developments, Special Use Permits & Industrial Use Permits

Site Posting Requirements

1. Broadcast signs shall be installed and removed by the applicant
2. Broadcast signs shall be installed 28 days before the Planning Commission hearing
3. Broadcast signs shall remain in place until the Board of Supervisors has made a decision on the case
4. Broadcast signs shall be removed no later than 30 days after the Board of Supervisors has made a decision on the case
5. Broadcast signs shall be placed adjacent to each road that borders the property, or as determined by the Planning Manager
6. Broadcast signs can contain more than one case
7. Regular signs, if needed, will be posted by County staff
8. Text on the sign shall meet the specifications shown on page 2 of this document
9. Broadcast sign specifications:
 - a. 4 Feet Tall by 8 Feet Wide
 - b. Top of the sign shall be 6 feet above the ground
 - c. Laminated plywood or MDO board
 - d. Attached to 2 – 4” by 4” wooden poles
 - e. All surfaces, including edges shall be painted **Yellow**
 - f. **Black** letters shall be used and shall be sized per the specifications shown below
10. Pinal County staff will place information about Planning Commission and Board of Supervisor hearings on the Broadcast sign in the designated area

Letter Sizes: All Letters Upper and Lower Case Unless Specified



Zoning and Planned Area Development Cases:
(4 Feet Tall by 8 Feet Wide)

PINAL COUNTY <i>Public Hearings</i>	
Case Number: Existing Zoning: Proposed Zoning: Acreage:	Public Hearing Information
Applicant Name: Applicant Phone Number:	Hearing Info Posted by Pinal County
Case Information Available at Pinal County Planning and Development Services (520) 866-6442	

Special Use Permit and Industrial Use Permit Cases
(4 Feet Tall by 8 Feet Wide)

PINAL COUNTY <i>Public Hearings</i>	
Case Number: Existing Zoning: Proposed SUP/IUP Use: Acreage:	Public Hearing Information
Applicant Name: Applicant Phone Number:	Hearing Info Posted by Pinal County
Case Information Available at Pinal County Planning and Development Services (520) 866-6442	

AFFIDAVIT OF POSTING OF BROADCAST SIGN

I, _____, Applicant for case _____ (Case number), personally caused ___ sign(s) to be posted in a visible place on or near the proposed project site on _____ (Date), at least 28 days before the Planning and Zoning Commission Public Hearing, regarding the proposed _____ (Type of application), in unincorporated Pinal County

The notice was posted as indicated on the attached map and photograph.

Applicant

STATE OF ARIZONA)
) ss:
COUNTY OF PINAL)

Subscribed and sworn to me by _____ this ___ day of _____, 20____.

Notary Public
My Commission Expires: