Yuma County, Arizona
DEPARTMENT OF DEVELOPMENT SERVICES
2351 West 26th Street, Yuma, Arizona 85364
Phone: (928) 817-5000
Fax: (928) 817-5020

TEMPORARY SPECIAL USE PERMIT

1. **Application**
   To apply for a Temporary Special Use Permit the property owner or his/her designated agent must complete a Temporary Special Use Permit application and submit the application to the County Planning and Zoning Division at 2351 W. 26th Street.

   Fees
2. A non-refundable fee is required at the time the application is submitted. The fee is $660.00 for each request.

   Submittal Requirements
3.
   - A site plan must be submitted with the application;
   - A licensed physician's written statement certifying medical need for custodial care because of advanced age or medical condition;
   - An improvement permit from the Department of Development Services for a septic system or connection to a sanitary sewer, for the second dwelling, or a statement from the Department of Development Services Environmental Health Manager certifying that an improvement permit is not required;
   - A floor plan showing that the existing dwelling is insufficient to provide independent private living space for the needs of both the individual and the custodian(s); and,
   - An affidavit signed by the applicant declaring and acknowledging that the applicant will remove the second dwelling within sixty (60) days after the medical necessity ceases to exist or after the temporary special use permit expires, whichever occurs first.

4. **Review of Permit**
   The review period normally takes a minimum of one (1) month, which includes review of the application by the Planning & Zoning Division, Environmental Health Section, Zoning Enforcement Section, and the Engineering Division.

5. **Notification of Applicant**
   After review of the application is complete, the case planner will notify the applicant in writing that the permit has been either approved or denied.

6. **Expiration of Permit**
   The case planner shall notify the zoning enforcement section upon e xpiration of any temporary use permit to insure compliance with the temporary use permit regulations

YUMA COUNTY

PLANNING AND ZONING APPLICATION FORM

ONLY FOR UNINCORPORATED AREA OF YUMA COUNTY, ARIZONA

OFFICE USE ONLY

CASE NO. _____

PROPERTY OWNER(S):

NAME: _____ PHONE # (___) _____-_____

MAILING ADDRESS: _____

FAX# (_____) ____-_____ E-MAIL: _____

AGENT (IF ANY)

NAME (please print): _____ _____
Last Name First Name

PHONE # (_____) _____-_____ MAILING ADDRESS: _____

FAX# (_____) _____-_____ E-MAIL: _____

Assessor's Parcel Number(s): _____

_____

LEGAL DESCRIPTION: SEC_____ TWP_____RNG_____

_____

_____

Acreage: _____ (☐gross ☐net)

CURRENT ZONING _____ PROPOSED ZONING: _____

CURRENT LAND USE DESIGNATION: _____

PROPOSED LAND USE DESIGNATION: _____

PLANNING AREA: _____

INTENDED USE: _____

_____

TYPE OF APPLICATION:

- ☐ Rezoning
- ☐ Special Use Permit
- ☐ Minor Amendment
- ☐ Major Amendment
- ☐ Variance
- ☐ Lot Tie
- ☐ Interpretation
- ☐ Land Division Permit
- ☐ Temporary Use Permit*
- ☐ Temporary Use Permit*-**4-H/FFA**
- ☐ Temporary Special Use Permit*
- ☐ Commission Initiative

ZONING ORDINANCE SECTION # FOR INTERPRETATION: _____

ATTACH EXPLANATION OF REQUESTED INTERPRETATION

OFFICE USE ONLY

Date Received: _____

Accepted by: _____

Fee Paid: $ _____

The applicant agrees to cooperate with planning staff in completing necessary site visits for preparation of reports, information and to post zoning notices all in accordance with Arizona Revised Statutes.

Signed this _____ day of _____20____

_____

_____

Signature(s) of Property Owner(s) or ☐ Legal Agent

**Approval of this application/permit does not void deed restrictions. Please review the deed restrictions before paying the application fee.*

***If this request is approved, the action becomes effective 30 days after the date of the public hearing.*

Revised 9/23/2021

Department of Development Services
Planning and Zoning Division

A.R.S. §12-1134 WAIVER

As provided for by A.R.S. §12-1134(I), the undersigned Owner, or Owner's Agent, of property affected by zoning action _____ does hereby waive any A.R.S. §12-1134 claim for diminution in value related to said zoning action.

If the undersigned is the Owner's Agent, it is further warranted and represented that this Agent has the legal power to bind the Owner to this waiver.

_____	_____	_____
Printed Name	*Signature*	*Date*
_____	_____	_____
Printed Name	*Signature*	*Date*

State of Arizona)
) ss
County of Yuma)

Subscribed and sworn before me this _____ day of _____, 20_____.

_____
Notary Public

(notary seal)

Revised 08/2009

MINIMUM SITE PLAN REQUIREMENTS

- Applicant name
- Physical location; address and Assessor's Parcel Number
- Lot dimensions
- North Arrow
- Scale (Standard engineering scale preferred (i.e., 1"=20', 1" =50', etc.)
- Existing and proposed improvements; buildings, structures, pools, water well, septic with leach lines) fences, walls, drainage/retention basins
- Physical limitation; drainage basins, canals, irrigation laterals, steep slopes (___%), washes
- Access; current and proposed
- Parking
- Distances from existing and proposed structures to property lines.
- _____

Yuma County Arizona
Dept. of Development Services
Planning & Zoning Division