



## **Planning and Community Services Department**

2825 3<sup>rd</sup> Ave. North, 4<sup>th</sup> Floor

Billings, MT 59101

Phone: (406) 657-8246 or (406) 247-8676

Fax: (406) 657-8327

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## **ZONING COMPLIANCE PERMIT INFORMATION**

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### **PURPOSE:**

To ensure development occurs in accordance with the applicable zoning regulations, a Zoning Compliance Permit is required Section 27-623 prior to the construction of any structure within Yellowstone County's Zoning Jurisdictional Area, and Special Zoning Districts.

### **PROCESS:**

#### **I. Prior to Residential Construction**

- **Applicant consults applicable zoning regulations** – Contact a planner at the Planning and Community Services Department if you have any questions – (406) 657-8246
- **Applicant should contact the City-County Health Department for a septic permit** – (406) 256-2770, 217 N. 27<sup>th</sup> Street (3<sup>rd</sup> floor, Yellowstone County Courthouse)
- **Applicant should contact the State of Montana Building Codes Division** to ensure compliance with state building code regulations – (406) 841-2040
- **Applicant submits 1 ELECTRONIC PDF COPY and email to [viegj@ci.billings.mt.us](mailto:viegj@ci.billings.mt.us) and 1 PAPER COPY of required materials on minimum 11" x17" sheet** and \$52.00 application fee to the Planning and Community Services Department, to include:

**Zoning Compliance Permit Application**, completed and signed.

**Site Plan**, including all existing and proposed structures, decks/porches, driveways, property lines, watercourse and easements on a minimum 11" x 17" sheet (drawn to scale with setback measurements from property lines labeled).

**Building Elevation Plans on a minimum 11" x 17" sheet** (drawn to scale with measurements labeled).

**Floodplain** location information (**If Applicable**) – if property may be located in a floodplain, contact the Yellowstone County Floodplain Administrator, Yellowstone County Courthouse, 217 N 27<sup>th</sup> Street, 4<sup>th</sup> Floor (406) 256-2775.

## **II. Prior to Commercial Construction**

- **Applicant consults applicable zoning regulations** – Contact a planner at the Planning and Community Services Department if you have any questions – (406) 657-8246
- **Applicant should contact the City-County Health Department for a septic permit** – (406) 256-2770, 217 N. 27<sup>th</sup> Street (3<sup>rd</sup> floor, Yellowstone County Courthouse)
- **Applicant should contact the State of Montana Building Codes Division** to ensure compliance with state building code regulations – (406) 841-2040
- **Applicant submits 1 ELECTRONIC PDF COPY and email to [viegj@ci.billings.mt.us](mailto:viegj@ci.billings.mt.us) and 1 PAPER COPY of required materials** to the Planning and Community Services Department, to include:
  - Zoning Compliance Permit**, completed and signed with applicable permit fee.

**Site Plan**, including all existing and proposed structures, decks/porches, driveways, off-street parking, loading areas, property lines, watercourses and easements (drawn to scale with **setback** measurements from property lines labeled).

**Landscaping Plan**, showing how the property will be landscaped in adherence to the landscaping requirements of the zoning district the commercial project is located in.

**Building Elevation Plans** (drawn to scale with measurements labeled).

**Floodplain** location information (**If Applicable**) – If property may be located in a floodplain, contact the Yellowstone County Floodplain Administrator, Yellowstone County Courthouse, 217 N. 27<sup>th</sup> Street, 4<sup>th</sup> Floor, (406) 256-2775

## **III. Planning Department Permit Processing**

- **Planning and Community Services Department reviews the application materials and may make a site inspection.** Completed applications will usually be reviewed within 5 working days for residential permits and within 20 working days for commercial permits.
- **Planning Division notifies the applicant whether the application is approved or denied.**
- **If approved, applicant builds structure** in accordance with the specifications submitted in the Zoning Compliance Permit, and in compliance with the requirements of the applicable zoning regulations.

## **Section 27-623. County Zoning Compliance Permit**

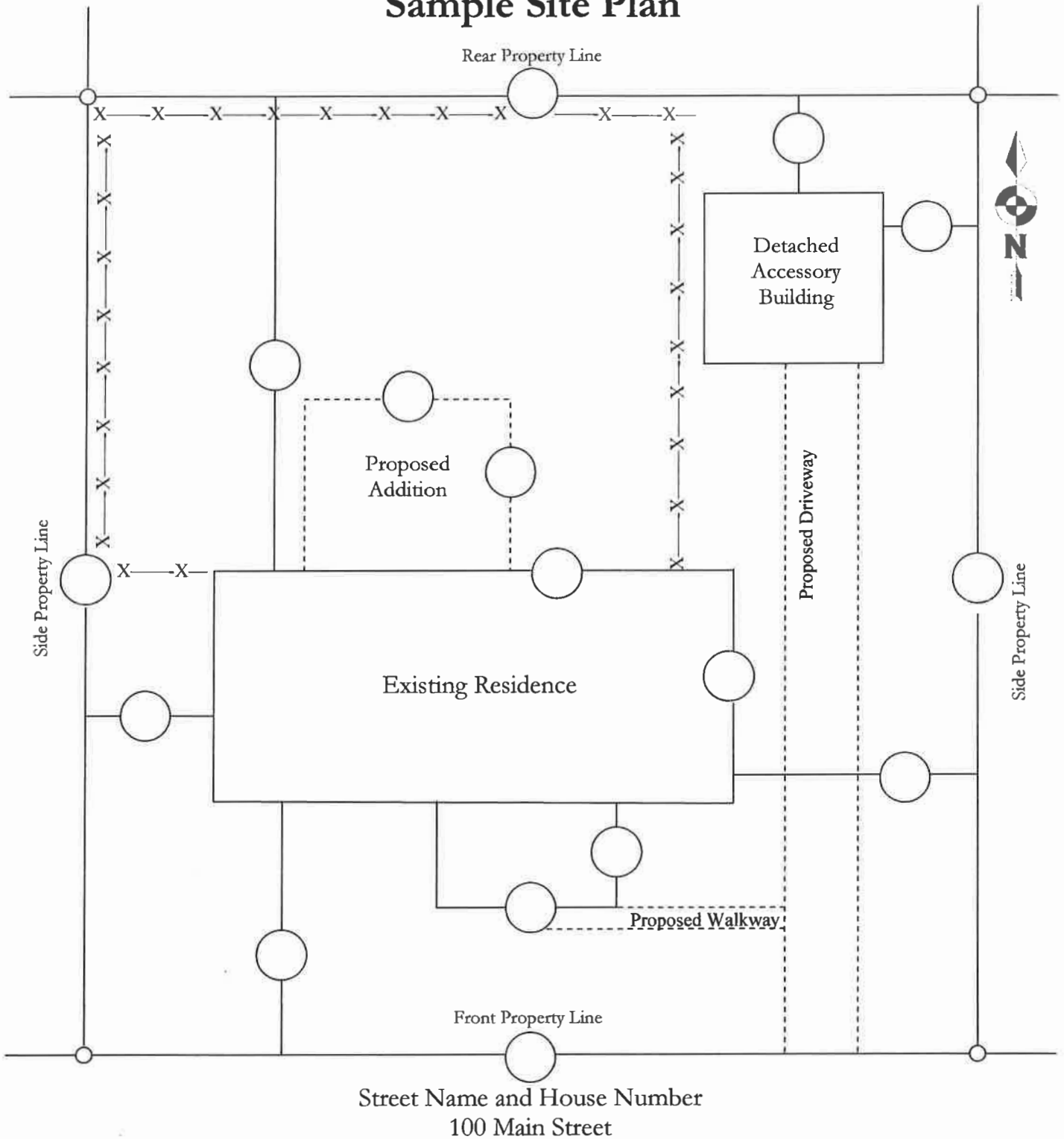
A Zoning Compliance Permit is only required for properties that are located outside the limits of the City of Billings but within the Unincorporated Jurisdictional Area.

No change of land use may be made; or no building or other structure shall be erected, moved, enlarged, rebuilt, added to, or structurally altered without first having received a Zoning Compliance Permit issued by the Zoning Coordinator or his/her designee, who shall determine that the permit is issued in compliance with the regulations set forth in this Resolution/Ordinance. The review of a Zoning Compliance Permit application shall be limited only to a review of the applicable zoning regulations and shall not constitute a review of compliance with any applicable building codes. A separate sign permit is required prior to the erection of any sign.

Each application for a Zoning Compliance Permit shall be accompanied by a site plan, building elevations and any other information requested by the Zoning Coordinator to adequately review the proposed project. Additionally, commercial projects require submittal of a landscaping plan and a site plan showing off-street parking, loading, etc. The Board of County Commissioners may set an application fee by Resolution for review of a Zoning Compliance Permit. The Zoning Coordinator or his/her designee may waive the submittal requirements for some of the above mentioned plans. Zoning Compliance Permits are valid for a period of six (6) months from the date of approval and may be extended for an additional six (6) months with written approval from the Zoning Coordinator.



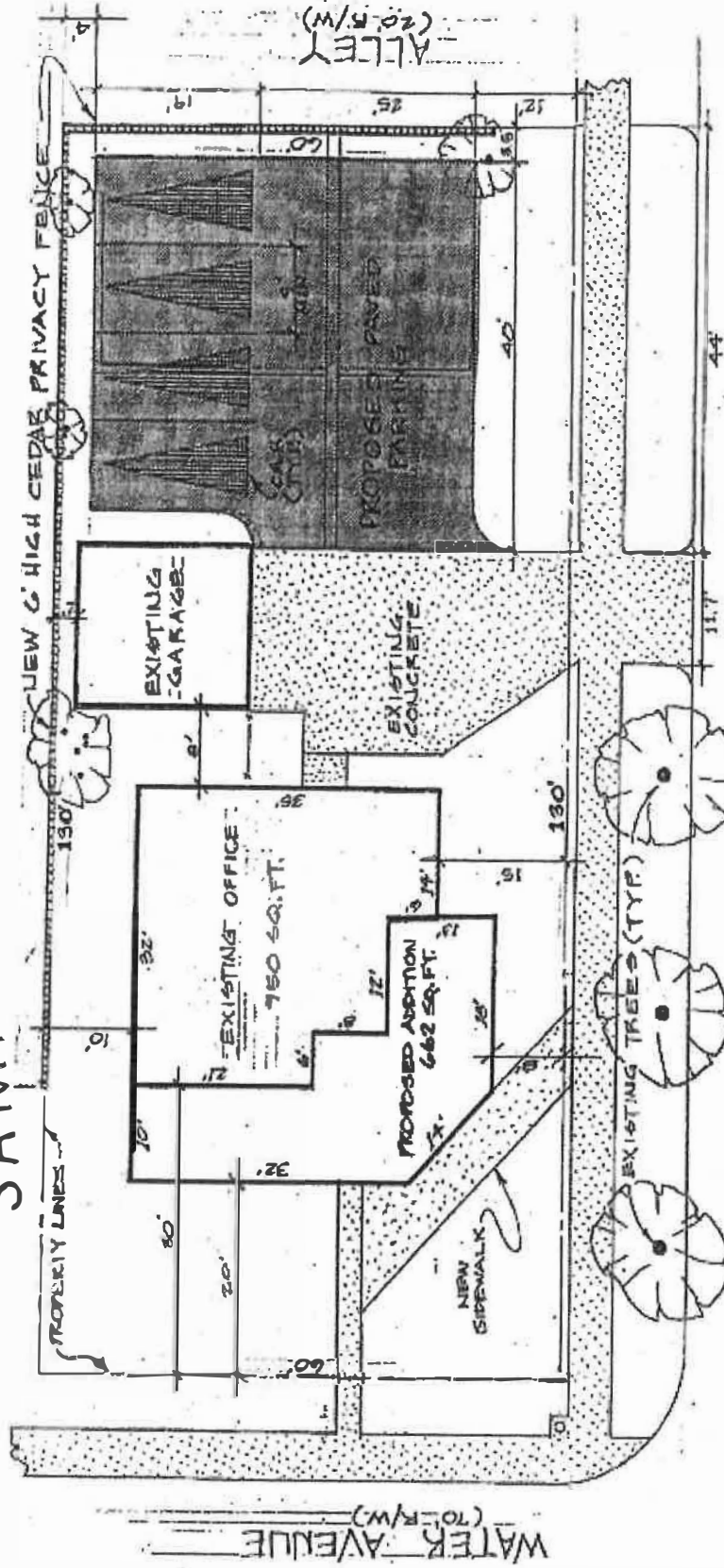
# Sample Site Plan



**Note:** On the site plan you create please show distances in feet where you see circles shown on the Sample Site Plan above.

This document is not intended to allow a site plan to be used when a survey, prepared by a licensed surveyor, is required.

# SAMPLE SITE PLAN



**PROPOSED SMITH OFFICE BLDG. ADDITION**  
 2732 WATER AVE. LOT 12, BLOCK 7, WATER SUB.





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**Required:**  11" x 17" site plan  11" X 17" elevation (applicant initial accompanying docs.)

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**Permit #** \_\_\_\_\_ **Fee \$52**

### **Application Information**

Applicant Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Applicant Address: \_\_\_\_\_ Email: \_\_\_\_\_

(Mailing address: please include City, State, Zip)

Property Owner Name: \_\_\_\_\_ Phone \_\_\_\_\_

Property Owner Address: \_\_\_\_\_

(Mailing address: please include City, State, Zip)

### **Property Information**

Property Address: \_\_\_\_\_

Section, Township, Range: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Lot size: \_\_\_\_\_ sq.ft. Lot area covered by structure(s): \_\_\_\_\_ sq.ft.  
\_\_\_\_\_ %

Subdivision/COS: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

### **Building Information**

Type and use of proposed structure(s): \_\_\_\_\_

Building separation in feet (for multiple buildings on one lot): \_\_\_\_\_

Is structure manufactured off-site? Yes / No --- If yes, was it built to Federal Department of Housing and Urban and Development (HUD) or International Building Code (IBC) standards? Yes / No

If the structure was manufactured off-site and built to IBC standards, please provide the Factory Built Building (FBB) number # \_\_\_\_\_

Number of dwelling units: \_\_\_\_\_

Total Square feet (including garages and unfinished spaces): \_\_\_\_\_

Building Height (calculated according to zoning regulation definition): \_\_\_\_\_

**(Commercial Only)** Landscaping Coverage: \_\_\_\_\_ sq.ft.

**(Commercial Only)** Number of Off-Street Parking Spaces: \_\_\_\_\_

Description of other existing structures on the property: \_\_\_\_\_

### AGREEMENT

The undersigned hereby certifies that the information submitted in this application is true and correct; and that the proposed work shall be done in accordance with the plans and specifications submitted in this application, and in compliance with the requirements of the applicable zoning regulations.

**Applicant's signature** \_\_\_\_\_ **Date** \_\_\_\_\_

#### FOR OFFICE USE ONLY

CC/Cash/Check # \_\_\_\_\_ Amount: \_\_\_\_\_ Rect. #: \_\_\_\_\_

Date Received: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Approved: \_\_\_ Denied: \_\_\_

Comments:

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Approved by: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

**Signature**