

Permit No. \_\_\_\_\_

Date: \_\_\_\_\_

# LYON COUNTY ZONING WECS RENEWAL PERMIT

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Name of Owner:	Phone:
Mailing Address:	S-T-R:
EMAIL:	Area (sqft or acres):
Site address:	
Legal Description: (or attach)	

Please provide proof of the following,

- Surety Bonds for reclamation                      Expires: \_\_\_\_\_
- Certificates of Liabilities                                      Expires: \_\_\_\_\_

Have there been changes to the property since last approval?    Yes      No  
If yes, include site drawing and explain:

*APPLICANT UNDERSTANDS THAT THE ABOVE USE IS AUTHORIZED AS APPROVED BY THE BOARD OF COUNTY COMMISSIONERS. IF THE APPROVED USE IS MISREPRESENTED, THE USE WILL BE RESCINDED.*

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**OFFICE USE ONLY:**

WECS Permit     Issued     Denied:    Date: \_\_\_\_\_    By: \_\_\_\_\_

Reason for denial: