



VILLAGE OF TAOS SKI VALLEY
PLANNING DEPARTMENT
POST OFFICE BOX 100
7 FIRE HOUSE ROAD
TAOS SKI VALLEY, NM 87525
575-776-8220

APPLICATION FOR CERTIFICATE OF COMPATABILITY PERMIT

Developer/Applicant: _____

Current Owner: _____

Address: _____

Architect: _____

Engineer: _____

Lot/Block/Subdivision: _____

Project
Description: _____

Administrative Plan Review Fee: _____

Paid _____

Infrastructure Review Fee: _____

Paid _____

AUTHORIZATION AND ACKNOWLEDGMENT:

I, the undersigned, am the owner of the above described property, or am authorized to represent the owners (proof of such authorization is attached). I recognize the fees paid with the Application may not constitute the total cost to process this request and that I will be responsible for the additional costs incurred by the Village of Taos Ski Valley to review and process this request. I agree to pay these costs upon receipt of a statement from the Village.

I also understand that this Application will be reviewed by the Village of Taos Ski Valley's Planning Department and said Village's Planning Department will deliver within twenty-one (21) days following this Application, a list of items which must be provided to the Village's Planning Department before any findings are given on this Application.

Owner or Representative

Date