Land Use & Permitting Fee Schedule

Effective July 1, 2026

PLANNING, DEVELOPMENT, & SUSTAINABILITY
Mailing Address: 200 West Broadway
Missoula, MT 59801
(406) 258-4657

Missoula COUNTY

COUNTY BOARD OF ADJUSTMENT

Variance - Ag, Single and Duplex Res	$1,262 ☐
Variance - Multi-Unit Res, Comm, Ind	$1,674 ☐
Special Exception	$1,812 ☐
Appeal of Administrative Action	$1,537 ☐
Renotification due to Applicant Action	$534 ☐

$ 0.00

COUNTY ZONINGS AND REZONINGS

Part I Zoning

District Creation/Amendment	$9,177 ☐
Variance Application	$1,262 ☐
Public Forum	$1,094 ☐

Part 2 Rezoning

Standard District	$6,118 ☐
Public Forum	$1,094 ☐
Renotification (Parts 1 & 2)	$534 ☐
Sxwtpqyen plan/code review	$1,150 ☐

$ 0.00

LAND USE REVIEW & PERMITS

Land Use / Zoning Compliance	_____ ☐
Temporary Use (Fireworks stand, etc.) Qty ____	$80 ☐
Home Occupation	$34 ☐
Nonconforming Use Determination	$306 ☐
Minor Waiver	$632 ☐
Major changes requiring re-review	$115 ☐
Options & Incentives (Chapter 9)	$ 0 ☐

☐ *Conservation Design* ☐ *Enterprise Com.*
☐ *Cottage Court* ☐ *Adaptive Reuse*
☐ *Mobile Home Park* ☐ *Clustered Sub.*
☐ *Tiny Home* ☐ *TED*

Permit during/after project: Double Fee ☐ $ 0.00

BUILDINGS FOR LEASE OR RENT

BFLR Review Fee	$1,150 ☐

GROWTH POLICY

Growth Policy Amendment	$9,177 ☐
Growth Policy Amendment Appeal	$9,177 ☐

FLOODPLAIN REVIEWS

Floodplain Development Permit	_____ ☐
Floodplain Determination	_____ ☐
Permit Extension	$77 ☐
Permit Variance Application	$1,648 ☐
Letter or Map Revision (LOMR) w/o Floodplain Permit	$222 ☐

Permit during/after project: Double Fee ☐ $ 0.00

SHORELINE PERMITS

	Residential	*Commercial*
Permit without Variance	$306 ☐	$459 ☐
Permit with Variance	$383 ☐	$536 ☐
Permit Extension	$130 ☐	$130 ☐

Permit during/after project: Double Fee ☐ $ 0.00

OTHER FEES / FEE ADJUSTMENTS

_____ $_____
_____ $_____
_____ $_____

$ 0.00

PROJECT INFORMATION

Address/Project: _____

APPLICANT INFORMATION

Name: _____

Address: _____

Phone / Email: _____

AGENT INFORMATION

Agent: _____

Address: _____

Phone / Email: _____

Total Amount Due $ 0.00

Date Received _____

Check # _____

Electronic Payment ☐

Cash ☐