When recorded, mail to:

City Clerk
City of Flagstaff
211 W. Aspen Avenue
Flagstaff, Arizona 86001

CONSENT TO CONDITIONS/WAIVER FOR DIMINUTION OF VALUE

The undersigned is the owner of certain real property legally described as Coconino County Assessor Parcel Number 105-10-469 in the City of Flagstaff, Arizona that is the subject of Conditional Use Permit Application No PZ-24-00149. By signing this document, the undersigned agrees and consents to all of the conditions imposed by the City of Flagstaff in conjunction with the approval of Conditional Use Permit No. PZ-24-00149 and waives and fully releases any and all claims and causes of action that the owner may have, now or in the future, for any "diminution in value" and for any "just compensation" under the Private Property Rights Protection Act, Arizona Revised Statutes § 12-1131, et seq., that may now or in the future exist as a result of the approval of Conditional Use Permit No. PZ-24-00149. Within ten (10) days after the execution of this Consent to Conditions/Waiver for Diminution of Value by the undersigned, the City Clerk shall cause this document to be recorded in the official records of Coconino County, Arizona.

Dated this_____day of_____, 2024

PROPERTY OWNER:

_____
Print Name

_____
Sign Name

State of Arizona)
) ss
County of_____)

SUBSCRIBED AND SWORN to before me this_____day of_____, 2024, by:

_____

_____
Notary Public

My commission expires: _____