



Special Use Permit Application

| | | | |
|--|--|--------------------|--|
| Property Owner: | | | |
| Address: | | | |
| Applicant (If different from property owner): | | | |
| Home Phone: | | Cell Phone: | |
| Email: | | | |

| |
|--------------------------------|
| Present Use of Property |
| |

| |
|------------------------------|
| Special Use Requested |
| |

| | |
|---|--|
| Application is made in Accordance w/ Zoning Regulations Sections | |
|---|--|

The owner hereby declares that all information above is true to the best of his/her knowledge, that all conditions and standards set out in the Zoning Regulations pertaining to this use have been met or have been proposed to be met, and that, along with this application, sketch maps and the appropriate review and filing fees have been submitted.

Applicant Signature

Authorized Agent

Date

Date



Office Use Only

| Adjacent Zoning & Land Use | | |
|----------------------------|----------|--------|
| Direction | Land Use | Zoning |
| NORTH | | |
| SOUTH | | |
| EAST | | |
| WEST | | |
| Current Zoning | | |

| | | | |
|---------------------------|--|-------|--|
| Received by: | | | |
| Date Received: | | | |
| Fee Paid: | | | |
| Case No.: | | | |
| Appealed to Zoning Board: | | Date: | |
| Decision of Zoning Board: | | Date: | |