



## Application for Conditional Use Permit

This is an application for a Conditional Use Permit. The form must be completed and filed at the office of the Zoning Administrator.

### AN INCOMPLETE APPLICATION CANNOT BE ACCEPTED.

1. Name of applicant(s), owner(s) and/or their agent(s). All owners of all property requested to receive this conditional use permit must be listed on this form.

A. Applicant/Owner \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_  
Agent \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

B. Applicant/Owner \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_  
Agent \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

C. Applicant/Owner \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_  
Agent \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

2. The applicant hereby requests an exception as a conditional use permit for the purpose of establishing a \_\_\_\_\_ on property legally described as Lot(s) \_\_\_\_\_ Block(s) \_\_\_\_\_ of the \_\_\_\_\_ Addition

Metes and Bounds Descriptions:

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3. Development plan included?                      Yes                      No

4. The general location may be described as \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. I request this conditional use permit for the following reasons: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. We/I understand that this application cannot and will not be processed unless it is completed in its entirety with accurate and reliable information. This application must also be accompanied by the appropriate fee of \$75.00.

Signature of Record Land Owner: (Use separate sheet if necessary for names of additional owners/applicants.)

\_\_\_\_\_  
(Owner)

\_\_\_\_\_  
(Owner)

\_\_\_\_\_  
(Owner)

\_\_\_\_\_  
(Owner)

\_\_\_\_\_  
Authorized Agent (if any)

\_\_\_\_\_  
Authorized Agent (if any)

**Office Use Only:**

This application was received by the Zoning Administrator at \_\_\_\_\_ (\_\_\_\_.M.) on \_\_\_\_\_ . It has been checked and found to be completed and accompanied by required documents and the appropriate fee of \$75.00.

\_\_\_\_\_  
Terry R. Jones – Zoning Administrator

Date of Public Hearing: \_\_\_\_\_

Date of Approval/Disapproval by Planning Commission: \_\_\_\_\_

Date of Recommendation to the City Council: \_\_\_\_\_

Date of City Council Action: \_\_\_\_\_