Application for Special Use Permit

(Must Be Submitted At Least Four (4) Weeks Prior To Meeting)

Completed Application must include all fees, a site plan application along with 10 full size copies and 1 reduced copy of site plan.

\$1,000 Fee

Applicant:Date:				
Address:				
Telephone: (Fax: (Fax: (
Applicants Signatur	e:			
Owner (If different	than applicant):			
Address:		Telephone ()	Fax ()	
Owner's Signature_				
Subject Property Ac	ddress:			
	Provide the legal descripti separate sheet to this app	on of the property affected - if a	dditional space is needed	
Proposed Use(s):				
For Office Use Only:	Date Filed	Amount Po	aid:	
	Case #	Hearing Do	ate:	
	Current Zonina:	Parcel ID N	lo.:	