SPECIAL USE APPLICATION

Name of Applicant:

Address of Applicant:

Telephone:

Date:

Location/Address of Property:
(both common address and legal description of property)

Are you the "Legal Owner of Record" of the Property?

Current Zoning of Property:

Measurements of Property:

Explain in the space below why you are applying for Special Use Permit:

_____
Applicant's Signature

_____
Date

****

Fee Paid: _____ _____
(Date) **(Amount)**

Paid By: _____

Approved by Planning and Zoning: _____

Approved by City Council: _____

Date Permit Issued: _____