Application for Conditional Use Permit

Date Received _____ Application Case No. _____

1. Address of the property subject to this application:
   _____
2. Name of Applicant:_____
3. Address of Applicant: _____
4. Applicant Phone Number: _____
5. Name of property Owner(s): _____
   (if different from Applicant)
6. Property Owner phone number: _____
7. Property Owner(s) address: _____
8. Attorney Name (if any): _____
9. Attorney Address: _____
10. Attorney Phone/Email: _____

SECTION 560- Procedure and Requirements for Approval of Conditional Use Permits:
Conditional uses shall conform to the procedures and requirements of Sections 561-568, inclusive of this ordinance. At a minimum, the application shall contain the following information. If additional space is needed, attach separate pages numbered to correspond to the applicable paragraph.

11. Attach a legal description of the subject property. (A copy of the deed contains the required description – if you are in doubt, show the Official what you have prior to obtaining a survey).
12. Zoning district: _____
13. Description of existing use: _____
    _____
    _____
14. Description of proposed conditional use: _____

_____
_____

15. Attach a plan of the proposed site for the conditional use showing the location of all buildings/structures/parking/traffic areas/open spaces/landscaping/refuse and service areas/utilities/signs/yards and any other pertinent information. (Please include all relevant dimensions)

16. A narrative statement evaluating the effects on adjoining property, the effect of such elements as noise, odor and fumes, and on adjoining property- a discussion of the general compatibility with adjacent and other properties in the district:
    _____
    _____
    _____

17. The beginning date of the conditional use, Building or Structure as well as any and all evidence establishing that the conditional use continually and legally existed from the beginning date of the conditional use to the date of the application. (Please attach additional evidence as needed to this application referencing this section).
    Beginning Date: _____

THE APPLICANT MUST BE PREPARED TO ADDRESS EACH OF THE ABOVE STANDARDS AT THE PUBLIC HEARING AND BE ABLE TO DEMONSTRATE COMPLIANCE.

18. List below the names and mailing addresses, as shown of the Union County Auditor's current tax list or the Union County Treasurer's mailing list, all of the owners of record of property contiguous to and directly across the street from the subject property.

Address of Property	Property Owner's Name(s)	Owner's Mailing Address
_____	_____	_____
_____	_____	_____
_____	_____	_____

(USE ADDITIONAL SHEETS IF NECESSARY)

Under penalty of Perjury, I hereby certify that the information contained in this application is true and accurate to the pest of my knowledge. This permit will expire or may be revoked if work has not begun within six (6) months or completed within one (1) year.

Signature of Applicant:_____