



**TOWN OF MANHATTAN
CITY-COUNTY PLANNING OFFICE
P. O. BOX 96
207 S 6th St.
406-284-3235---FAX 406-284-2090**

CONDITIONAL USE PERMIT APPLICATION

Certain uses, while generally not suitable in a particular Zoning District, may, under certain circumstances, be acceptable. When such circumstances exist, a Conditional Use Permit may be granted subject to certain conditions. The permit is granted for a particular use and not for a particular person or firm. Conditional Use Permits shall not be granted for a use which is not specifically designated as a conditional use in the subject district regulations of the Manhattan Zoning Ordinance.

1. Name and address of property owner: _____

Phone: _____
2. Name and address of applicant/representative: _____

Phone: _____
3. Name and Address of Engineer/Architect/Planner: _____

Phone: _____
4. Name of project/development: _____
5. Address of proposed development: _____
6. Legal description: _____
7. Current Zoning _____ Land Area _____ sq. ft. _____ acres.
8. Describe the proposed development (use additional sheets if necessary:
(For Home Occupations please include the following: Employees, Hours of Operation, Any signage proposed, Expected water and sewer use, Noise increases from normal residential use, Lighting impacts to adjacent landowners, Air quality impacts to adjacent landowners, and ADA accessibility.) _____

9. Review Fee:

This application must be accompanied by appropriate fee and twenty (20) copies of a completed site plan (see submittal requirements) drawn to scale on paper not larger than 24" x 36". Application deadline varies. Please check with the Planning Office for scheduling. This application must be signed by both the applicant and property owner (if different) before the submittal will be accepted.

I (we) hereby certify that the above information is true and correct to the best of my (our) knowledge.

Applicant's Signature

Property Owner's Signature

Date:

Date: _____

CONDITIONAL USE PERMIT SUBMITTAL CHECKLIST

Applicant: _____

Subject Property Address: _____

This checklist shall be completed and returned as part of the submittal. Any item checked "NO" or "N/A" (not applicable) must be explained in a narrative attached to the checklist. Incomplete submittals will be returned to the applicant. Twenty (20) copies of the site plan drawn to scale on paper not larger than 24" x 36" which contain the following:

1. GENERAL INFORMATION

- | | | | |
|--|-----------|----------|-----------|
| a. Name of project/development. | YES _____ | NO _____ | N/A _____ |
| b. Location of project/development by street address. | YES _____ | NO _____ | N/A _____ |
| c. Location map, including area within one half (½) mile of site. | YES _____ | NO _____ | N/A _____ |
| d. Name and mailing address of developer/owner. | YES _____ | NO _____ | N/A _____ |
| e. Name and address of engineer/architect, landscape architect and/or planner. | YES _____ | NO _____ | N/A _____ |
| f. Date of plan preparation and changes. | YES _____ | NO _____ | N/A _____ |
| g. North point indicator. | YES _____ | NO _____ | N/A _____ |
| h. Suggested scale of 1" to 20', not less than 1" to 100' | YES _____ | NO _____ | N/A _____ |
| i. Zoning Classification within 200' | YES _____ | NO _____ | NA _____ |

2. SITE PLAN INFORMATION

- | | | | |
|---|-----------|----------|-----------|
| a. Boundary line of property with dimensions, | YES _____ | NO _____ | N/A _____ |
| b. Location, identification and dimension of the following existing and proposed data, to a distance of 100 feet outside site plan boundary unless otherwise stated | YES _____ | NO _____ | N/A _____ |
| 1. Topographic contours at a minimum interval of two feet, or as determined by the Zoning Administrator; | YES _____ | NO _____ | N/A _____ |
| 2. Adjacent streets and streets rights of way to a distance of 150 feet, except for sites | | | |

- adjacent to major arterial streets
where the distances shall be 200 feet; YES_____ NO_____ N/A _____
3. On-site streets and rights-of-way; YES_____ NO_____ N/A _____
4. Ingress and egress points; YES_____ NO_____ N/A _____
5. Traffic flow on-site YES_____ NO_____ N/A _____
6. Traffic flow off-site; YES_____NO _____ N/A_____
7. Utilities and utility rights-of-way
and/or easements. (Main and service line
Locations and sizes);
(a) electric, natural
electric, natural gas, telephone, Cable TV YES_____NO _____ N/A_____
- (b) water and sewer (sanitary,
treated effluent and storm); YES _____NO_____ N/A_____
- (c) off-site fire hydrants; YES _____NO _____N/A_____
8. Building and structures; YES_____NO _____N/A_____
9. Parking facilities, including bike racks; YES_____ NO_____ N/A_____
10. Water bodies and wetlands; YES_____ NO_____ N/A_____
11. Surface water holding ponds, streams
and irrigation ditches; YES_____ NO_____ N/A_____
12. Grading and drainage plan; YES_____ NO_____ N/A_____
13. Significant rock outcroppings YES_____ NO_____ N/A_____
14. Sidewalks, walkways, driveways,
Loading areas and docks,
Bikeways; YES_____ NO_____ N/A_____
15. Provision for handicapped accessibility,
including, but not limited to,
Wheelchair ramps, parking spaces,
and hand rails, and curb cuts; YES_____ NO_____ N/A_____
16. Fences and walls; YES_____ NO_____ N/A _____
17. Exterior signs; YES_____NO _____ N/A_____
18. Exterior refuse collection areas; YES_____NO _____ N/A_____

19. Exterior lighting; YES_____NO____ N/A_____

20. Landscaping, detailed plan YES_____NO____N/A_____

- c. Number of employee and nonemployee parking spaces, existing and proposed, and total square footage of each.

YES_____NO____ N/A_____

- d. Site statistics including site square footage, nonresidential building square footage, percent of site coverage (building and parking), net dwelling unit density, percent of park or open space.

YES_____NO____N/A_____

- e. A reproducible copy of the site plan with appropriate signatures shall be submitted upon approval.

YES_____NO____N/A_____

3. BUILDING INFORMATION (ON-SITE):

- a. Elevation: Building elevation of all exterior walls of the building(s) or structure(s).

YES_____NO____N/A_____

- b. Materials To Be Used: The applicant is encouraged to consider the effect of color in creating a design character that is appropriate for and compatible with the area.

YES_____NO____N/A_____

- c. Height Above Mean Sea Level: Height above mean sea level of the elevation of the lowest floor and location of lot outfall when the structure is proposed to be located in a flood way or flood plain area.

YES_____NO____N/A_____

4. PERMITS:

A listing of all required and applicable permits and status of applications.

YES_____NO____N/A_____

5. REVIEW FEES:

1. Conditional Use Permit application fee must accompany this application.

B. Filing of Application; Fee: After the applicant has met with the Planning Board, all applications for conditional uses, including all required supportive information, shall be filed with the Clerk/Treasurer of the Town Council. Applications shall be accompanied with appropriate filing fee. Additional fees may be assessed when professional services (attorneys, engineers, planners, etc.) are obtained in relation to the permit.

The applicant is responsible for these fees.