



Conditional Use Permit Application

1) Address: _____	
2) Zoning Classification: _____	3) Parcel Number: _____
4) Name and Address of Applicant: (Please Print)	
Company Name: _____	
Contact Person: _____	Daytime Phone: _____
Street Address: _____	
City: _____	State: _____ Zip Code: _____
Email Address: _____	
5) Name and Address of Property Owner: (authorization required if different than applicant)	
Company Name: _____	
Contact Person: _____	Daytime Phone: _____
Street Address: _____	
City: _____	State: _____ Zip Code: _____
Email Address: _____	
The undersigned Owner agrees that the above person (applicant shall, for the sole purpose(s) set forth herein, have the full authority to act as an agent for the property owner shall be, for all purposes set forth herein, deemed an agent in the direct employment of the above-referenced for the following purposes (provide a complete description of the scope of the agency relationship); and shall have full power and authority to act in the name of the above-referenced, make application(s), receive information and notices, represent, and bind same in any matters falling within the scope of the purpose(s) set forth herein above.	
Owner's Signature: _____	Date: _____
6) Proposed Use and Conditions:	
7) Briefly describe exhibits which are part of this application:	
8) The undersigned Applicant hereby requests a conditional use permit on the basis of the representations contained herein:	
Applicant Signature: _____ Date: _____	
9) Fee Paid <input type="checkbox"/> \$150.00	10) Site plan provided <input type="checkbox"/>
11) Basis for requiring Permit: _____	
12) Fire Department Inspection: _____	Date _____
13) Anticipated Date of Hearing: _____	at 7:30 pm.