



LAND USE APPLICATION

TO BE COMPLETED BY STAFF			
<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Variance	Date Received: _____	Staff Initials: _____
<input type="checkbox"/> Non-Conforming Use	<input type="checkbox"/> Zone Change	Fee: _____	Case File Number: _____
<input type="checkbox"/> Partition	<input type="checkbox"/> Plan Change	Receipt #: _____	Action: Administrative <input type="checkbox"/> Planning Commission <input type="checkbox"/>
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Exception	Assigned Staff Member: _____	
<input type="checkbox"/> Replat (Partition/Subdivision)		Current Zoning: _____	Comp. Plan: _____
<input type="checkbox"/> Planned Development		Violation: _____	Prev. Action: _____
<input type="checkbox"/> Property Line Adjustment		Number of Lots Involved: _____	
<input type="checkbox"/> _____		Any new lots created: _____	Existing lot sizes: _____
		Lot size required by Zone: _____	Proposed lot sizes: _____

TO BE COMPLETED BY APPLICANT			
What is proposed: _____			
Name of Development, if applicable: _____			
Name of Applicant: _____			
Last	First	Middle	
Mailing Address: _____ City: _____ St: _____ ZIP _____			
Applicant is: <input type="checkbox"/> Legal Owner <input type="checkbox"/> Contract Buyer <input type="checkbox"/> Option Buyer <input type="checkbox"/> Agent			
Name of Contact Person (if other than applicant): _____			
Last	First	Middle	
Mailing Address of contact: _____ ZIP _____			
Phone Numbers of: Applicant: WK _____ HM _____ Contact Person: WK _____ HM _____			
Site Address: _____ Total Land Area: _____			
Directions to Property: _____			
Legal Description: T _____ R _____ Section _____ Tax Lot(s) _____			
Adjacent Properties Under Same Ownership: T _____ R _____ Section _____ Tax Lot(s) _____			
Present Use of Property: _____			
Existing/Proposed Source of Water: _____ Existing/Proposed Method of Sewage Disposal: _____			
Anticipated Date of Development: _____			
I hereby certify the statements contained herein, along with the evidence submitted, are in all respects true and correct to the best of my knowledge.			
_____ Owner's Signature (Required)		_____ Applicant's Signature	
_____ Date		_____ Date	