



\$100.00 Non-refundable Fee

**Application for Special Use
Request for Public Hearing**

This request must be turned into the Secretary of the Planning and Zoning Commission no later than _____, two weeks before the next regularly scheduled meeting.

This is a request for an appeal from the table of uses within the city limits of Green River and a request for a public hearing before the Planning and Zoning Commission and City Council.

NOTE: The applicant (or a representative) must be present at the meeting or the application will be null and void.

The Special Use Permit must meet the following criteria to be approved by the Planning and Zoning Commission per appendix B., Section 9.3(B):

- 1.) The Special Use Permit will not endanger the public health or safety;
- 2.) The Special Use Permit will not injure the value of adjoining or abutting property;
- 3.) The Special Use Permit will be in harmony with the area in which it is located; and
- 4.) The Special Use Permit will be in conformity with the comprehensive master plan.

This Special Use Permit application is being submitted for the following purpose (attach a separate sheet if necessary):

This application must be **completed in full** and accompanied by a detailed diagram of your zone lot, including dimensions of the zone lot, all structures and their outside dimensions, distances of each structure from each other and property boundaries. ****Failure to provide clear and correct drawings may cause a delay in consideration of your application.****

1.) Name of Applicant: _____
 Mailing Address of _____
 2.) Applicant: _____

 Name of Property _____
 3.) Owner (if different): _____
 Mailing Address of _____
 Property Owner (if _____
 4.) different): _____

 5.) Phone Number: _____
 6.) Street address of property for which Special Use Permit is requested:

 7.) Lot Zoning: (R-1, B-1, etc.) _____
 8.) The land/building(s) is presently being used as (residential, business, etc.):
