

Clinton County Planning & Zoning



SPECIAL USE APPLICATION

Fees: (Non-Refundable)

Special Use Permit \$500.00 \$ _____
Legal Notice \$150 \$ _____
Adjoining 1000' lot owners:
Certified mail rate* \$10.98 x # of Adj. _____ \$ _____

Permit # _____ Total: \$ _____

Fee must accompany this application, make check payable to the "Clinton County Treasurer"

Present Zoning _____ Required Zoning _____

Total Acreage: _____ Number of Lots _____

Address of Property: _____

Section _____ Township _____ Range _____

Subdivision _____ Lot _____

Parcel #: _____

Is the proposed use compatible with the surrounding area? _____

How many employees do you intend to have? _____

How many buildings will be involved in this Special Use? _____

- A building permit must be purchased through the Planning & Zoning office before construction of any building in a Special Use Permit. The fee is _____/sq.ft.
- A listing of the names and addresses of all property owners 1000' from the property requested for this Special Use Permit. This can be obtained through the Planning and Zoning office
- A site plan shall show:
 1. Approximate size and location of all buildings.
 2. Access from road or roads.
 3. Parking arrangements.
 4. Interior drives and any service areas.
 5. Landscaped areas.
 6. All proposed signs, if any.
- Location map showing any development and the zoning of adjacent property within one thousand (1000) feet
- The full legal description of the boundaries of said area
- A description of the general character of all buildings

- Explain how each of the following may be altered should this special use permit be granted:
 1. The location and size of the proposed request in relation to the site and to adjacent sites and uses of property, and the nature and intensity of the operations proposed thereon:

2. Utilities and services, including: water, septic systems, drainage and electricity _____

3. The location, nature, and height of buildings, walls, fences and other improvements; their relation to adjacent property and any need for buffering or screening. _____

4. The general compatibility with adjacent properties, other properties in the district and the general safety, health, comfort and general welfare of Clinton County _____

Has Board of Zoning Adjustment granted any variance regarding this property?

If yes, please attach an explanation on separate sheet.

All required items *must* be submitted with this application, or the application may be rejected.

I hereby affirm that the above statements and representations are true and correct.

Applicant's Signature

Date

Applicant's Signature

Date

Planning and Zoning Administrator Signature

Date received complete application