



THE FOLLOWING **MUST** BE SUBMITTED WITH THIS FORM BEFORE APPLICATION MAY BE PROCESSED

↓ PLEASE BRING ITEM(S) WITH YOU WHEN SUBMITTING FORM ↓

- 1 Copy of survey plat(s) and/or deed(s) to the parcel(s) requested for Special Exception Permit.
- 2 Completed County ADJOINING PROPERTY OWNER(S) LIST form.
- 3 If grading, new construction and/or addition(s) to existing bulding(s)/structure(s) is involved, a Site Plan drawing must be submitted.

APPLICANT INFORMATION

APPLICANT NAME: \_\_\_\_\_

APPLICANT MAILING ADDRESS:

Street Address or P.O. Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Area Code & Home Telephone \_\_\_\_\_

Area Code & Work Telephone \_\_\_\_\_ Area Code & Mobile Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

IS APPLICANT AN OWNER OF THE PARCEL(S) ON WHICH THE PERMIT BEING APPLIED FOR WILL BE USED:  - YES  - NO If 'YES', skip to Permit Information. If 'NO', provide Owner Information below:

OWNER INFORMATION

OWNER NAME: \_\_\_\_\_

OWNER MAILING ADDRESS:

Street Address or P.O. Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Area Code & Home Telephone \_\_\_\_\_

Area Code & Work Telephone \_\_\_\_\_ Area Code & Mobile Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

PERMIT INFORMATION

APPLICANT REQUESTS SPECIAL EXCEPTION PERMIT FOR USE(S) AND/OR ACTIVITY(IES) ON THE FOLLOWING PARCEL(S):

PARCEL #1: \_\_\_\_\_ PARCEL SIZE: \_\_\_\_\_  
County Tax Map ID No. Acres/SF Street Address of Existing Building located on Parcel (if any)

CURRENT PARCEL ZONING: \_\_\_\_\_

CURRENT PARCEL USE:  - AGRICULTURAL  - COMMERCIAL  - INDUSTRIAL  - RESIDENTIAL  - VACANT/UNUSED

A SPECIAL EXCEPTION PERMIT FOR PARCEL #1 IS REQUESTED PURSUANT TO COUNTY CODE SECTION \_\_\_\_\_ FOR THE FOLLOWING USE(S) AND/OR ACTIVITY(IES): \_\_\_\_\_

WILL THE ABOVE TAKE MORE THAN 24 MONTHS TO COMPLETE:  - YES  - NO IF 'YES', HOW MANY MONTHS: \_\_\_\_\_

PARCEL #2: \_\_\_\_\_ PARCEL SIZE: \_\_\_\_\_  
County Tax Map ID No. Acres/SF Street Address of Existing Building located on Parcel (if any)

CURRENT PARCEL ZONING: \_\_\_\_\_

CURRENT PARCEL USE:  - AGRICULTURAL  - COMMERCIAL  - INDUSTRIAL  - RESIDENTIAL  - VACANT/UNUSED

A SPECIAL EXCEPTION PERMIT FOR PARCEL #1 IS REQUESTED PURSUANT TO COUNTY CODE SECTION \_\_\_\_\_ FOR THE FOLLOWING USE(S) AND/OR ACTIVITY(IES): \_\_\_\_\_

WILL THE ABOVE TAKE MORE THAN 24 MONTHS TO COMPLETE:  - YES  - NO IF 'YES', HOW MANY MONTHS: \_\_\_\_\_

PARCEL #3: \_\_\_\_\_ PARCEL SIZE: \_\_\_\_\_  
County Tax Map ID No. Acres/SF Street Address of Existing Building located on Parcel (if any)

CURRENT PARCEL ZONING: \_\_\_\_\_

CURRENT PARCEL USE:  - AGRICULTURAL  - COMMERCIAL  - INDUSTRIAL  - RESIDENTIAL  - VACANT/UNUSED

A SPECIAL EXCEPTION PERMIT FOR PARCEL #1 IS REQUESTED PURSUANT TO COUNTY CODE SECTION \_\_\_\_\_ FOR THE FOLLOWING USE(S) AND/OR ACTIVITY(IES): \_\_\_\_\_

WILL THE ABOVE TAKE MORE THAN 24 MONTHS TO COMPLETE:  - YES  - NO IF 'YES', HOW MANY MONTHS: \_\_\_\_\_

**APPLICANT AND OWNER CERTIFICATION & SIGNATURE**

*NOTE: If Applicant and Owner are separate individuals, both must sign. If Applicant and Owner are the same, please sign as Owner.*

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

I THE UNDERSIGNED AM AN OWNER OF THE ABOVE-DESCRIBED PARCEL(S) AND CERTIFY I AM LEGALLY AUTHORIZED TO MAKE THIS APPLICATION FOR SPECIAL EXCEPTION PERMIT, HAVING THE PERMISSION OF ALL OTHER OWNERS (IF ANY).

OWNER SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**FOR COUNTY USE ONLY**

DATE APPLICATION RECEIVED: \_\_\_\_\_ RECEIVED BY: \_\_\_\_\_

Initials

PERMIT APPLICATION FEE: \$ \_\_\_\_\_

**OWNER INFORMATION**

OWNER NAME: \_\_\_\_\_  
 Must be same as given on APPLICATION FOR REZONING and/or APPLICATION FOR SPECIAL USE PERMIT form(s)

**ADJOINING PROPERTY OWNER(S)**

**FOR COUNTY USE ONLY**

PLEASE LIST ALL PROPERTY OWNER(S) AND STREET ADDRESS(ES) OF PARCEL(S) IMMEDIATELY ADJOINING AND DIRECTLY ACROSS STREET(S), ROAD(S) AND HIGHWAY(S) FROM PARCEL(S) REQUESTED FOR REZONING AND/OR SPECIAL EXCEPTION PERMIT (this information is needed for comparison purposes and will be verified by County records):

_____ Name of Adjoining Property Owner	_____ Street Address of Adjoining Property (if none, list as "Vacant")	_____ County Tax Map ID No.
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