CONDITIONAL USE PERMIT APPLICATION POLK COUNTY COMMUNITY DEVELOPMENT DEPARTMENT PLANNING DIVISION

Checked By: Received By: Date Submitted: Fee Paid: Application No.:	FEE: Hearing \$ Without Hearing \$ Home Occup/Cottage Ind. \$
Please type or print all information b	below. An incomplete application cannot be accepted.
APPLICANT	OWNER(S)
Name	
Address	Address
City	City
StateZip	Zip
Phone: Home Work	Phone: Home Work
Fax:Mobile	
Township; Range; S Comp. Plan Designation	Tax Acct. No Acreage ection (s); Taxlot (s) Zone property (For example, conditional use, variance, etc.)
PUBLIC SERVICE AND UTILITIES IN	NFORMATION:
A. School District	B. Fire District
How will the following be provided for the	ne proposed use? If applicable please provide documentation.
C. Water Service Type	D. Sewage Disposal Type
REQUEST: (For example, "To establish	a home occupation in the EFU zoning district.")

CONDITIONAL USE PERMIT APPLICATION CHECKLIST

In all land use actions, the "burden of proof" is on the applicant. It is important that you provide information, which clearly describes the nature of the request and indicates how the proposal meets all the criteria within the Zoning Ordinance.

The information requested below is required at the time you submit your application. The processing of your application does not begin until the application is determined to be complete. An incomplete application will postpone the decision, or may result in denial of the request.

[]	A written statement of intent, attached to this application, with necessary supporting evidence which fully and factually describes the following:
	A complete explanation of how the request complies with provisions and criteria in the Zoning Ordinance. A planner will explain which sections of the Ordinance pertain to your specific request. You must address each of the Ordinance criterion, on a point-by-point basis in order for this application to be deemed complete.
	A description of the property in question, including, but not limited to the following: size, vegetation, crops grown, access, existing buildings, topography, etc.
	A complete description of the request, including any new structures proposed.
	If applicable, documentation from sewer and water district showing availability for connection.
[]	A plot plan of the property on a scale map. These maps and aerial photos are available from the Community Development Department. Indicate the following on your plot plan:
	Location of all existing and proposed buildings and structures
	Existing County Road, public right-of-way or other means of legal access
	100-year floodplain elevation (if applicable)
	Vegetation on the property
	Location of any outstanding physical features
[]	A Current deed with legal description. Deed copies may be obtained at the Polk County Clerk's Office.
[]	A current print-out from the Polk County Assessors Office for each taxlot subject to the proposed land use action.
aware that the this land use ac Polk County C	tis application and its related documents are accurate to the best of my knowledge. I am re is a twelve (12) day appeal period following the date of the Planning Director's decision of etion. I understand that the signature on this application authorizes representatives of the ommunity Development Department to enter upon the subject property to gather information is request. If the application is signed by an agent, the owner's written authorization must be
	Signatures of Owners that appear on deed and/or Authorized Agent

PLEASE NOTE: THIS APPLICATION MUST BE RETURNED IN PERSON. MAIL-IN APPLICATIONS CANNOT BE ACCEPTED.