

City Use Only

Date CUP Approved: _____ Date Received: _____
 CUP No.: _____ CUP Application No.: _____
 Council Hearing Date: _____ P&Z Hearing Date: _____ Paid Fee of \$150.00 on: _____
 Land Use Category _____
 Application _____
 Approved: _____ Denied: _____ Date: _____ Complete: _____ Drawings Approved: _____ Date: _____

**CITY OF OVERLAND
 CONDITIONAL USE PERMIT APPLICATION**

**(PLEASE PRINT)
 APPLICANT:** _____

Home Address: _____ City: _____

State: _____ Zip Code: _____ Phone No.: _____

DESCRIPTION OF PROPERTY:

Street Address or Location _____

Parcel Locator Number _____

Existing Zoning District Classification _____

Land Use/Development: Existing or Prior Use: _____ Code No. _____

Proposed: _____ Code No. _____

OWNER OF PROPOSED BUSINESS: _____

Home Address: _____ City: _____

State: _____ Zip Code: _____ Phone No.: _____

NAME OF BUSINESS: _____

PROPERTY INTEREST OF APPLICANT: Owner Renter/Lessee Other

OWNER OF PROPERTY: _____

Home Address: _____ City: _____

State: _____ Zip Code: _____ Phone No.: _____

REQUIRED ATTACHMENTS

_____ Site Plan (In conformance with Article 9, Zoning Code)

_____ Out-boundary Plat

_____ Applicant's & Structure Owner's Valid Drivers License

_____ Legal Description of the subject property

Application is hereby made with willful consent of Owner for a Conditional Use Permit on the proposed land use/development submitted for review as shown and described on this form and that of accompanying Attachments all of which we certify to be true and accurate.

Signature of Applicant	Date	Signature of Property Owner	Date	Signature of Business Owner	Date
_____	_____	_____	_____	_____	_____
PRINT NAME		PRINT NAME		PRINT NAME	

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NOTE: APPLICANT and BUSINESS OWNER MUST ATTEND MEETING