

COUNTY OF HAMILTON
PLANNING & ZONING ADMINISTRATOR

APPLICATION FOR CONDITIONAL USE

1. Name of Applicant: _____ Date _____

2. Address & Telephone #: _____

3. Jurisdiction: _____ Hamilton County _____ Hampton _____ Giltner
 _____ Marquette _____ Phillips _____ Hordville

4. Address & Legal Description of Property: _____

5. Conditional Use & Reason For Request: _____

6. Zoning of Property: _____

7. Is this use authorized as a conditional use in the zone: _____

8. A drawing to scale must accompany this application, showing dimensions of lot, existing buildings and other information pertaining to this conditional use.

9. A list of property owners and their address within three hundred (300) feet of the exterior boundaries of this property involved must be listed on the reverse side of this application.

THE ABOVE STATEMENTS AND ACCOMPANYING MATERIAL ARE COMPLETE AND ACCURATE.

Applicant

A fee of \$50.00 must accompany this application.

Hamilton County Joint Planning Commission Action:

Date legal notice was published: _____ Date of Hearing: _____

Commission Decision: _____ Request Approved _____ Request Denied
 _____ Request Approved Conditionally

Comments: _____

HAMILTON COUNTY JOINT PLANNING COMMISSION

Chairman

Action of the Hamilton County Commissioners:

Date legal notice was published: _____ Date of Hearing: _____

Commissioner's Decision: _____ Request Approved _____ Request Denied
 _____ Request Approved Conditionally

Comments: _____

HAMILTON COUNTY COMMISSIONERS

Chairman