

DO NOT WRITE IN THIS SPACE

Date Submitted ___/___/20___ Public Hearing ___/___/20___ Present Zoning_____ Application No _____

APPLICATION FOR A STANDARD CONDITIONAL USE PERMIT

___ Madison County ___ Pierce County ___ Battle Creek ___ Madison City ___ Meadow Grove ___ Newman Grove ___ Tilden

DIRECTIONS:

1. Fill out the form completely. Please print or type or electronically, print and submit. Use additional sheets if needed.
2. Filing fee: \$130.00. Make check payable to Madison or Pierce County Treasurer depending on application location.
3. Contact Madison or Pierce County Planning and Zoning Department if you have any questions.
4. Submit a list of property owners within 1,000 feet for Madison and 300 feet for Pierce and Madison County cities, **must be prepared by a certified abstractor.**

Name_____

Address_____ City_____ State_____

ZIP_____ Home Phone_____ Work Phone _____

Present Use of Subject Property_____

Pursuant to the Pierce or Madison County Zoning Regulations, application is hereby made for the following proposed use of property or structure: _____

Directional Part _____Section ___ Township ___ Range ___ Lot No. _____

Area of Subject Property, Square Feet and/or Acres _____

How is the adjoining properties actually used? (example: farm, livestock, residential, grass, etc.)

North_____ South_____

East_____ West _____

How many years for this permit? _ 5yrs _10yrs _15yrs _20yrs _permanent _Other _____

Is a survey required for this use? ___ Yes ___ No a) If yes is it completed? ___ Yes ___ No b) If not completed, expected date of completion? _____

Name of Survey_____

Will this use in all other respects conform to the applicable regulations of the district in which it is located? ___ Yes ___ No

Explain _____

Will this use conform to all other applicable regulations and laws of any governmental jurisdiction? ___ Yes ___ No

Explain _____

MADISON COUNTY JOINT PLANNING AND ZONING DEPARTMENT
Phone (402) 370-3577 Fax (402) 370 3581 1112 Bonita Dr. Norfolk, NE 68701
PIERCE COUNTY PLANNING AND ZONING DEPARTMENT
Phone (402) 329-4600 111 W Court Room 6 Pierce, NE 68767

Will this use create a possible nuisance to neighbors? Yes No (example: noise, odors, traffic)
Explain _____

Will this use involve customers to be at the site? Occasionally Regularly Never

Will this use have adequate water, sewer, and drainage facilities (Approved by the local health department, Pierce/Madison Board of Commissioners or City Council, and the State of Nebraska Health and Human Services)? Yes No

Explain _____

Will ingress and egress be so designed as to minimize traffic congestion in the public streets/roads? Yes No

Explain _____

Will this use require a permit from a state or federal agency in order to operate? Yes No

Explain _____

Will this use hire new or additional employees? Yes No If yes how many? _____

Explain _____

Will this use require a new structure, building or facility to be built? Yes No

Explain _____

Estimated Cost of new structure, building or facility to be built \$ _____

Enclosed:

Site Plan Soil Suitability Map Easements Other _____

THE ZONING ADMINISTRATOR, WHO MAY BE ACCOMPANIED BY OTHERS, IS HEREBY AUTHORIZED TO ENTER UPON THE PROPERTY DURING NORMAL WORKING HOURS FOR THE PURPOSE OF BECOMING FAMILIAR THE PROPOSED SITUATION.

Application Fee is Non-Refundable

Signature of Owner or Signature of Agent

Date Date