



FEE \$ 300.00

## APPLICATION FOR SPECIAL OR CONDITIONAL USE

Amendment  Special Use  Conditional Use

Applicant:

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Mailing Address:

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Physical Address:

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Telephone \_\_\_\_\_

Legal description of land on which special use will be located (include acreage of tract)

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Zoning District:

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Special Use Requested:

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Statement of Justification for Special Use:

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Effect of proposed use on adjacent areas and the community at large:

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Current Well Permit Number:

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Time schedule of any proposed construction:

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I hereby certify that the statements and information provided in this application are, to be best of my knowledge, true and correct; and applicant further agrees that any work and construction associated with the operations or uses of the land proposed herein will be performed in conformity with the Jackson County Zoning Resolution and in compliance with all terms and conditions which may be imposed on the authorization for the special use by the Board of County Commissioners of Jackson County.

Date

Applicant's signature

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