



THE CITY OF
PERRYVILLE
MISSOURI

Plant your family here.

215 North West Street
Perryville, MO 63775-1327
Phone: 573-547-2594

E-Mail: buildinginspectors@perryvillemo.gov

**PLANNING AND ZONING COMMISSION
SPECIAL USE PERMIT APPLICATION**

The undersigned of the following described premises (herein called "Applicant"), located at

hereby requests a special use permit for the property described above.

NAME OF APPLICANT: _____

ADDRESS: _____ PHONE NUMBER: _____
_____ EMAIL ADDRESS: _____

PRESENT ZONING CLASSIFICATION: (CHECK ALL THAT APPLY)

R-1 SINGLE FAMILY RESIDENTIAL
R-2 SINGLE FAMILY RESIDENTIAL
R-3 SINGLE FAMILY RESIDENTIAL
R-4 TWO-FAMILY RESIDENTIAL
R-5 GENERAL RESIDENTIAL DISTRICT

C-1 LOCAL COMMERCIAL DISTRICT
C-2 GENERAL COMMERCIAL DISTRICT
C-3 CENTRAL BUSINESS DISTRICT
C-4 PLANNED COMMERCIAL DISTRICT
MH-1 MOBILE HOME PARK DISTRICT

I-1 LIGHT INDUSTRIAL DISTRICT
I-2 HEAVY INDUSTRIAL DISTRICT
I-3 PLANNED INDUSTRIAL PARK DIST

REQUIRED INFORMATION:

STATE THE PURPOSE OF THE REQUEST FOR A SPECIAL USE PERMIT.

IS TRANSFER OF OWNERSHIP OF THE TRACT DEPENDENT UPON THE GRANTING OF THIS SPECIAL USE PERMIT?
YES NO

HAS THERE BEEN A PRIOR APPLICATION FOR A SPECIAL USE PERMIT FOR THIS PROPERTY? __YES __NO

IF SO: DATE OF APPLICATION _____
PRIOR ACTION TAKEN _____

STATE THE REASONS WHY YOU BELIEVE THE REQUESTED SPECIAL USE PERMIT WILL BE BENEFICIAL TO THE NEIGHBORHOOD AND THE CITY:

REQUIRED ATTACHMENTS:

___ PERMIT FEE \$100.00; MADE PAYABLE TO THE CITY OF PERRYVILLE

I UNDERSTAND THAT THE CITY OF PERRYVILLE DOES NOT RESEARCH OR ENFORCE HOMEOWNER'S ASSOCIATION RULES AND REGULATIONS. PLEASE NOTE THAT ALL PROPERTIES LOCATED WITHIN 185' OF THE TRACT WILL BE NOTIFIED OF THE SPECIAL USE APPLICATION.

I STATE UPON MY OATH THAT ALL THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE.

SIGNATURE OF APPLICANT

APPLICATION DATE

APPLICATION FEE: \$100.00 (PAYABLE TO THE CITY OF PERRYVILLE)

OFFICE USE ONLY

APPLICATION FEE RECEIVED: ___ YES ___ NO

DATE: _____

REPRESENTATIVE OF THE CITY OF PERRYVILLE

DATE

DATE APPLICATION FILED WITH P&Z ADMINISTRATOR: _____

DATE REFERRED TO PLANNING AND ZONING COMMISSION: _____

DATE NOTICES MAILED TO ADJOINING LANDOWNERS: _____

APPROVAL/DENIAL PLANNING AND ZONING COMMISSION: _____

DATE FILED WITH BOARD OF ALDERMAN: _____

DATE APPLICANT REQUESTED PUBLIC HEARING: _____

DATE OF PUBLIC HEARING: _____

BOARD OF ALDERMAN FINAL ACTION: _____

DATE OF FINAL ACTION: _____