

Special Use Form – Page 2

		Plan Submitted	Requirement
8.	Floor Area Ratio (%) (7b/6)	_____	_____
9.	Total Paved Area (ft)	_____	_____
10.	Total Impervious Cov. (7a+9)/6	_____	_____
11.	Number of Parking Stalls	_____	_____
12.	Density (6/13)	_____	_____
13.	Number of Units (Residential)	_____	_____
14.	For Multi-Family:		
	Efficiency	_____	_____
	1 Bedroom	_____	_____
	2 Bedroom	_____	_____

Additional required information for Special Use Permit:

15. Statement describing the use proposed. This should include information about the hours of operation, number of employees and clients, type of programming or services, traffic expected to be generated, and any other pertinent information and/or site development characteristics.

16. All applications are presented to the Planning Commission at a public hearing for a recommendation prior to begin forwarded to the City Council for final consideration. Therefore, all applications must be submitted four weeks prior to 1st Monday of month in order to ensure proper notice time and preparation time. Incomplete applications cannot be processed.

_____	_____	_____	_____
Owner's Signature	Date	Applicant's Signature	Date

Staff Review: Fee: _____ Date Received: _____ Receipt # _____

Planning Commission Review Date: _____ Council Review Date: _____

_____ Approved _____ Denied Reviewed by: _____

REASONS FOR DENIAL: _____

EXISTING NON-CONFORMITIES/VARIANCES GRANTED: _____

APPROVAL STAMP: