

TOWN OF SUPERIOR
199 N. Lobb Avenue
P.O. Box 218
Superior, AZ 85173
(520) 689-5752

APPLICATION FOR CONDITIONAL USE PERMIT

Application No.: _____ Date Received: _____ Fee: \$400.00

Receipt No.: _____ Received by: _____

In order to expedite processing of this application for a Conditional Use Permit, and to eliminate unnecessary delays to the applicant, the Zoning Administrator will not accept this application unless all items have been checked off, and this application form has been signed and dated. In addition, all information is to be submitted in a neat and legible format, and all drawings drawn to scale.

In the event errors or omissions are discovered, the application will be deemed incomplete, and will be returned to the applicant for revision.

APPLICATION IS HEREBY MADE TO THE ZONING ADMINISTRATOR THAT:

Property Owner: (Attach sheet if more than one property owner.)

Name: _____ Phone No.: _____

Address: _____ Cell No.: _____

City: _____ State: _____ Zip: _____

Applicant: (Attach sheet if more than one applicant.)

Name: _____ Phone No.: _____

Address: _____ Cell No.: _____

City: _____ State: _____ Zip: _____

BE GRANTED A CONDITIONAL USE PERMIT TO: _____

ON PROPERTY LOCATED AT: _____

Assessor's Parcel No.: _____

Legal Description of Property: _____

Existing Use of the Subject Property: _____

General Plan Land Use Designation: _____

Zoning of Subject Property: _____

NOTE TO APPLICANT: Please check each of the following applicable items when completed and made a part of this application.

- One (1) copy of a site plan (24" x 36"), including two (2) reduced copies (8 1/2" x 11") indicating the following: Location and boundaries of the property, dimensions of all lot lines, names and location of all bordering streets and alleys, size and dimensions of all on-site buildings (existing and proposed), design and layout of vehicular access, on-site parking and loading areas, location of trash bins, location of all free-standing signs (existing and proposed), location of all walls or fences, direction of existing and proposed drainage, scale, north arrow and date.
- Identify landscape areas (existing and proposed); itemize size and type of plants.
- Total land area in square feet or acreage.
- Parking and paving areas (square footage and percent of lot coverage).
- Open Space Area (square footage and percent of lot coverage).
- Recreational Areas (square footage and percent of lot coverage).

PLANNING AND ZONING COMMISSION REVIEW OF EACH CONDITIONAL USE PERMIT APPLICATION WILL INVOLVE CONSIDERATION OF THE FOLLOWING FACTORS:

1. Compliance with all applicable requirements of the Town's General Plan, Zoning Code and Development Standards.
2. Overall site design and architectural quality as it relates to the intent of the Zoning Ordinance and to the general nature of the area in which the development is to be located.

The Planning and Zoning Commission will consider all aspects of the conditional use permit before making a determination to approve, conditionally approve, or deny the request. The ruling of the Planning and Zoning Commission will be final unless appealed to the Board of Adjustment in accordance with Section 2.4 of the Town's Zoning Ordinance.

APPLICANT'S SIGNATURE AND DATE INDICATES COMPLETION AND INCORPORATION OF THE ABOVE-MENTIONED ITEMS INTO THIS APPLICATION FOR A CONDITIONAL USE PERMIT.

I certify that I am the record owner or authorized agent, and that the information filed is true and correct to the best of my knowledge.

Applicant's Signature

Date

Owner's Signature

Date