

CITY OF STE.GENEVIEVE, MISSOURI

165 S. Fourth Street

Ste. Genevieve, MO 63670

Phone (573) 883-5400 Fax (573) 883-8105

Special Use Permit Application

FEE: \$50.00

PAID:

DATE

RECEIVED:

PLEASE PRINT OR TYPE (BLACK INK ONLY)

SECTION A.

1. Street Address of Tract or Tracts:

2. Names and Addresses of **All** legal owners of tract(s).

3. Current Zoning Classification:

A (Agricultural) ____ I-1 (Light Industrial) ____
MH (Mobil Home Park) ____ I-2 (Heavy Industrial) ____
R-1 (Single Family Residential) ____ C-1 (General Commercial) ____
R-2 (General Residential) ____ C-2 (Central Business) ____
C-4 (Neighborhood Commercial) ____

4. Is this property located in a historic district? Yes No

5. Signatures of **All** persons listed in Item #2.

PRINTED OR TYPED NAME SIGNATURE

PRINTED OR TYPED NAME SIGNATURE

6. Contact for Application:

Name: _____

Address: _____

Phone: _____

I state upon my oath that all the information contained in this application is true and correct:

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Applicant's Signature

SECTION B.

1. Legal description of tract(s)

2. Attach to this application a **scaled plat** of the tract(s), with **all** of the following information included:

- a: All boundary dimensions
- b: All adjoining streets and alleys.
- c: All present improvements.
- d: All intended improvements.
- e: All adjoining and cornering property lines and references to all owners listed in

Section C.

SECTION C:

1. Names and addresses of all adjoining property owners. (Include land which corners on tract or which is across streets or alley-ways). **(Use or attach additional pages if necessary)**

With this application, the applicant must provide to the Planning and Zoning Administrator a stamped, plain business (legal-size) envelope addressed to each adjoining property owner.

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SECTION D.

1. State the use to which this tract will be put if the SUP is granted. Attach plans, pictures, and/or drawings.

2. Is a transfer of the ownership of the tract dependent upon the granting of the SUP?

YES NO

3. Please indicate if the proposed use will involve any of the following:

- Gasoline Storage and/or use
- Storage and/or use of other flammable liquids
- Storage and/or use of explosives or chemicals
- Advertising signs or other display
- Fence
- Machinery or heavy equipment
- Trash/refuse/garbage generation

Please explain if any of the items above are indicated: _____

4. What other uses will exist on the premises? _____

5. Has there been a prior application for rezoning, special use permit or variance for this tract?
If so, give the date and state the prior action taken.

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SECTION E.

1. State the reason why you believe the requested Special Use Permit will be beneficial to you and/or the neighborhood. If you believe that a hardship will result if the SUP is denied, please elaborate.

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THIS SECTION TO BE COMPLETED BY PLANNING & ZONING ADMINISTRATOR

Application Address: _____

Applicant Name : _____

Date of Planning and Zoning Meeting: _____

Planning and Zoning Commission: Approved Denied

Date of Board of Alderman Meeting: _____ Approved Denied

Received By: _____ **Date & Time** _____

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POLICE CHIEF'S REVIEW:

1. In your opinion, will the proposed use substantially increase traffic or congestions?

() YES (Please Explain Below)

() NO

2. Please indicate if there are other law enforcement concerns:

Police Chief's Signature

Date

FIRE CHIEF'S REVIEW

1. In your opinion, will the proposed use substantially increase fire hazards?

() YES (Please Explain Below)

() NO

2. Please indicate if there are other fire protection concerns:

Fire Chief's Signature

Date