

# GRAY COUNTY ZONING APPLICATION INSTRUCTIONS

- \* All applicants requesting an approval of a conditional use (Article 14) should consult the Zoning Administrator prior to submitting a formal application. The purpose of the consultation is to advise the applicant of his/her rights and responsibilities in the filing of said applications.
- \* Complete the attached application form.
- \* Applicant must attach a Development Plan, per Article 7
- \* If a variance is needed, applicant must attach a Variance Request
- \* Attach a certified list of landowners to be notified, per Article 20-102
- \* Include proper fee for application & landowner notifications  
(\$75 application fee + \$10 per landowner to be notified, per resolution 2011-21)

# GRAY COUNTY CONDITIONAL USE APPLICATION

LAND OWNER NAME	MAILING ADDRESS	PHONE #
APPLICANT NAME (if different than land owner)	MAILING ADDRESS	PHONE #

(USE A SEPARATE SHEET IF NECESSARY FOR NAMES OF ADDITIONAL OWNERS/APPLICANTS)

CONDITIONAL USE # BEING APPLIED FOR: \_\_\_\_\_

THE APPLICANT HEREBY REQUESTS A CONDITIONAL USE PERMIT FOR THE PURPOSE OF:

(give detailed description): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**(NOTE: CONDITIONAL USE APPLICATION MUST INCLUDE A DEVELOPMENT PLAN)**

SITUS ADDRESS OF THE PROPERTY: \_\_\_\_\_

LEGAL DESCRIPTION OF THE PROPERTY: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I (WE), THE APPLICANT(S), ACKNOWLEDGE RECEIPT OF THE INSTRUCTIONS EXPLAINING THE METHOD OF SUBMITTING THIS APPLICATION. I (WE) REALIZE THAT THIS APPLICATION CANNOT BE PROCESSED UNLESS IT IS COMPLETELY FILLED OUT AND IS ACCOMPANIED BY THE APPROPRIATE ATTACHMENTS (IF NEEDED) AND THE REQUIRED FEE.

\_\_\_\_\_  
OWNER/APPLICANT

\_\_\_\_\_  
OWNER/APPLICANT

\_\_\_\_\_  
OWNER/APPLICANT

\_\_\_\_\_  
OWNER/APPLICANT

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OFFICE USE ONLY  
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THIS APPLICATION WAS RECEIVED IN THE OFFICE OF THE ZONING ADMINISTRATOR AT:

\_\_\_\_\_ (AM, PM) ON: \_\_\_\_\_

IT HAS BEEN CHECKED AND FOUND TO BE:

\_\_\_\_\_ COMPLETE

\_\_\_\_\_ INCOMPLETE (SEE BELOW)

ITEMS MISSING:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
ZONING ADMINISTRATOR

CONDITIONAL USE APPLICATION #:

\_\_\_\_\_

OFFICIAL DATE OF COMPLETE FILING & PAYMENT:

\_\_\_\_\_

DATE NOTIFICATIONS MAILED:

\_\_\_\_\_

DATE NOTIFICATION PUBLISHED IN PAPER:

\_\_\_\_\_

DATE OF HEARING:

\_\_\_\_\_