

PARCEL NO. _____
MAP NO. _____
ZONING CLASSIFICATION: _____

Office Use Only

APPLICATION/FILE NO. _____
REVIEW DATE: _____

FILING FEE: \$100.00 (Payable to Village of St. Cloud)

**VILLAGE OF ST. CLOUD
APPLICATION FOR
CONDITIONAL USE PERMIT**

Revised August 2017

Completed application is to be filed with the Village of St. Cloud, P.O. Box 395. To be placed on the agenda or a special meeting by the Village of St. Cloud, application must be filed two weeks prior to date of meeting. Applications will not be processed if all required attachments and filing fee of \$100 (payable to the Village of St. Cloud) is not submitted along with a complete and legible application. Application filing fee is non-refundable.

1. APPLICANT INFORMATION

APPLICANT: _____

ADDRESS: _____ E-MAIL: _____

PHONE: () _____ FAX NO. () _____

2. DESCRIPTION OF THE SUBJECT SITE/PROPOSED PROJECT

NAME OF PROPOSED/EXISTING BUSINESS: _____

ADDRESS OF PROPERTY AFFECTED: _____

LEGAL DESCRIPTION: _____

BRIEF DESCRIPTION OF EXISTING OPERATION OR USE: _____

DETAILED DESCRIPTION OF PROPOSED OPERATION OR USE INCLUDING ANY CHANGES TO THE EXISTING USE: _____

BRIEF DESCRIPTION OF ALL REQUESTED VARIANCES FROM PROVISIONS OF THE ZONING ORDINANCE, WHICH ARE RELATED TO THE PROPOSED OPERATION OR USE: _____

3. JUSTIFICATION OF THE PROPOSED CONDITIONAL USE

Written justification for the proposed conditional use, indicating reasons why the applicant believes the proposed conditional use is appropriate.

How is the proposed conditional use (independent of its location) in harmony with the purposes, goals, objectives, policies and standards of the Village of St Cloud Comprehensive Plan adopted July 7, 2009 and village ordinance 10-1-40?

Does the conditional use, in its proposed location, result in any substantial or undue adverse impact on nearby property the character of the neighborhood, environment, traffic, parking, public improvements, public property or rights-of-way? _____

How does the proposed conditional use maintain the desired consistency of land uses in relation to the setting within which the property is located? _____

Is the proposed conditional use located in an area that will be adequately served by utilities, or services provided by public agencies? If not, please explain. _____

4. NAMES AND ADDRESS (Indicate N/A for "Not Applicable" items)

OWNER OF SITE: _____

ADDRESS: _____ E-MAIL: _____

ARCHITECT: _____

ADDRESS: _____ E-MAIL: _____

CONTRACTOR: _____

ADDRESS: _____ E-MAIL: _____

5. CERTIFICATE

I hereby certify that all the above statements and attachments submitted hereto are true and correct to the best of my knowledge and belief.

APPLICANT'S SIGNATURE

DATE

2013

PRINT ABOVE NAME

Office Use Only

ACTION BY VILLAGE BOARD

DATE OF MEETING: _____

APPROVED: _____ CONDITIONALLY APPROVED: _____ DENIED: _____

CONDITIONS

SIGNATURE: _____
President or Secretary of the Village of
St. Cloud

DATE: _____

NOTES

Permit may be revoked without notice if misrepresentation of any of the above information or attachments is found to exist.

Permit shall expire within one (1) year from date of approval unless substantial work has commenced.

Permit is null and void if issued in error. It is understood that any permit issued on this application will not grant any right or privilege to erect any structure or to use any permits for any purpose that is prohibited by the Village's Ordinance or any other State or local laws.

Changes in the plans or specifications submitted in the original application shall not be made without prior written approval of the Village of St. Cloud Board.

Check sidewalk grades from Village of St. Cloud Board with finished site grade.