Application Fee: $500.00
Permit No._____

CITY OF GAYLORD

APPLICATION FOR CONDITIONAL USE PERMIT

Street Location of Property:_____

Legal Description of Property:_____

_____

_____

Owner:_____
Name Address Telephone

Applicant:_____
Name Address Telephone Email Address

Property Zoning Classification:_____

Description of Request:_____

_____

_____

_____

_____

I hereby affirm that all information above and attached to this application are true and accurate to the best of my knowledge.

Signature of Applicant:_____ Date:_____

Signature of Owner:_____ Date:_____

NOTE: A Certificate of Survey may be required identifying the property lines and location of existing and proposed future buildings.

City of Gaylord Use Only:

Date application received:_____

CUP Application No._____

Application Fee Paid: $ _____ Date: _____ Receipt # _____

Planning & Zoning Commission Hearing Date:_____

City Council Action: ☐ Approved ☐ Denied Date:_____

City Signature:_____ Date:_____