## **CITY OF IOWA COLONY**

"Where We Make It Happen"

## **APPLICATION FOR SPECIFIC USE PERMIT**

FORM 'B'

APPLICATION DATE:
NAME OF APPLICANT:
THE LEGAL DESCRIPTION AND THE ADDRESS OF THE PROPERTY THAT IS SUBJECT OF THE APPLICATION FOR SPECIFIC USE:
A DETAILED DESCRIPTION OF THE SPECIFIC USE PERMIT THAT IS PROPOSED:
THE ZONING DISTRICT IN WHICH THE SUBJECT PROPERTY IS LOCATED. CIRCLE ONE: (MU) (SFR) (MH) (BR)
THE SIGNED CONSENT OF THE OWNER OR OWNERS OF THE SUBJECT PROPERTY, IF THE APPLICANT IS NOT THE OWNER OF THE PROPERTY:
THE APPLICANT'S INTEREST IN THE SUBJECT PRROPERTY IF THE APPLICANT IS NOT AN OWNER OF ALL OR PART OF THE PROPERTY.
SUCH OTHER INFORMATION OR DOCUMENTATION AS THE CITY COUNCIL OR ZONING ADMINISTRATOR MAY DEEM NECESSARY.
EACH APPLICATION FOR SPECIFIC USE PERMIT MUST BE ACCOMPANIE DBY A NON-REFUNDABLE FEE OF \$1,000.00 TO DEFRAY THE COST OF NOTIFICATION, ATTORNEY'S FEES OR PROCESSING TH APPLICATION.
NOTE: THIS APPLICATION EXPIRES IN 180 DAYS IF NOT SUBMITTED. I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS AND/ OR ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT.
SIGNATURE REQUIRED: