



**APPLICATION FOR CONDITIONAL USE PERMIT
PLANNING COMMISSION
CITY OF PLATTE CITY, MISSOURI**

1. Location _____
Street Address, if any, and general location

2. Subdivision _____ Lot _____ Block _____

3. Quarter Section ____ Section ____ Township ____ Range ____

4. Zoning Class _____

5. Applicant Name _____
Address _____
Residence Phone No. _____ Bus. Phone No. _____

6. Property Owner Name _____
Address _____
Residence Phone No. _____ Bus. Phone No. _____

Finance Company Name _____
(if applicable)
Address _____

7. If applicant is a corporation, provide the names, address and positions of the managing agent, registered agent, and all corporate officers and directors. (Separate Page if necessary)

8. Statement describing what the conditional use is for including the hours of operation.

9. Attach list of all property owners within two hundred (200) feet of the boundary proposed tract to be rezoned.

Note: Applicant is responsible for notifying the property owners by certified mail, return receipt requested, at least fifteen (15) days prior to public hearing date (City Clerk will provide notice to be mailed to the applicant). Applicant is responsible for presenting to the City Clerk by noon the Friday before the Public Hearing, the signed receipts from the mailing.

Application shall be filed at the Platte City City Hall with a filing fee in the amount of \$175.00 payable to the "City Of Platte City". The Planning Commission meets on the first Tuesday of the month. Notification must be published fifteen days prior to the meeting. Therefore, your hearing will be scheduled accordingly.

Applicant Signature _____ Date _____

Application received by: _____ Date _____

Official Use
Date Paid _____
Receipt No. _____
Fee \$ _____