

TOWN OF GREEN MOUNTAIN FALLS SPECIAL USE PERMIT APPLICATION

The following information is required for the submittal. A special use is not transferable and may be subject to annual review by the Planning Commission.

Date: _____

Applicant (s) Name: _____

Contact # _____ E-Mail: _____

Applicant (s) Mailing Address: _____

Street Address: _____

Legal: Lot _____ Block _____ Zoning _____

Standards governing the approval or disapproval of a special use petition include but are not limited to the following:

The petition conforms to the requirements of the zoning ordinances.

The use conforms to the requirements of the zoning ordinances.

The use is consistent with the goals and objectives of the Master Plan.

Neighboring land uses are compatible with the contemplated use.

The use will not result in an over-sensitive use of land.

The use will not result in undue traffic congestion or traffic hazards.

The use will not be unreasonably detrimental to the public health, safety and welfare.

STATEMENT OF REQUEST

Description of special use request:

Describe the demonstrated direct public benefit that the proposed special use will have for the Town and its residents:

Describe how the proposed development will be in harmony with the area in which it is to be located:

The undersigned applicant and owner certifies under oath and under penalties of perjury that the information found in the special use permit application are true and accurate to the best of his knowledge. I (we) certify that I (we) understand that the proposed special use will be in accordance with the submitted application, all provisions of the Town of Green Mountain Falls Zoning Regulations, other applicable Town Code regulations, and conditions imposed upon the issuance of this permit

APPLICANT(S) SIGNATURE _____

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TOWN STAFF ONLY - REVIEW / COMMENTS FROM GREEN MOUNTAIN FALLS MARSHAL'S AND PUBLIC WORKS DEPARTMENT:

_____ \$200.00 Special Permit Fee