CONDITIONAL USE APPLICATION
City of Smiths Station
P. O. Box 250
2336 Lee Road 430
Smiths Station, AL 36877

(334) 297-8771 Office   Website www.smithsstation.us   (334) 448-84322 FAX

CONTACT INFORMATION

Applicant Information Mailing Address	Owner of Record (if different from the Applicant)
Name:	Name:
Address:	Address:
City:	City:
State: Zip:	State: Zip:
Phone:	Phone:

PROPERTY INFORMATION

Street Address:_____

Parcel ID #: ____-____-____-____-____-____-_____

(Example: 14 - 04 - 19 - 000 - 10 - 02 - 12.009)

Current Zoning: _____   Existing Land Use: _____

Brief description of the proposed use: _____

PLEASE ADDRESS THE FOLLOWING USE STANDARDS

1. How is the proposed use appropriate in the location for which it is proposed?

_____

_____

2. Will the use result in a substantial advise effect on adjacent properties, the character of the neighborhood, traffic conditions, public infrastructure, etc.?

_____

_____

3. What precautions will be taken to minimize any adverse effects from the proposed use on the surrounding property owners?

_____

_____

CONDITIONAL USE APPLICATION
City of Smiths Station
P. O. Box 250
2336 Lee Road 430
Smiths Station, AL 36877

(334) 297-8771 Office   Website www.smithsstation.us   (334) 448-84322 FAX

STATEMENT OF UNDERSTANDING

I _____ (property owner or authorized applicant) UNDERSTAND this Conditional Use Request must be filed with all to the requirements of the City of Smiths Station Zoning Ordinance and all other information requested or required by the Planning Commission in order to be considered complete. I UNDERSTAND that this application will not be filed until all required information has been received and further understand that the Planning Commission reserves the right to postpone this request until such time as the requirements are met. I UNDERSTAND that if the request is approved the approval applies only to the property(s) shown on the site plan submitted and reviewed by the Smiths Station Planning Commission. I UNDERSTAND that at a later date if adjacent or property(s) are expected to be used in association with an approved conditional use then a Conditional Use Request must be submitted for the use of such adjacent or other property(s). I UNDERSTAND that if a request for conditional use is granted by the Smiths Station Planning Commission that detail structural drawings (building plans) are required for review and approval by the Planning Commission. I UNDERSTAND that if a request for conditional use is approved or approved subject to conditions, I must acknowledge such approval in writing and unconditionally accept and agree to any conditions imposed on the approval within fifteen (15) days following approval by the Smiths Station Planning Commission. In the event the conditional us request is not approved or is approved subject to conditions not acceptable to me, I may within fifteen (15) days either appeal such decision to the Circuit Court within 15 days.

_____   _____

Signature of (Owner or authorized Applicant)   Date

CONDITIONAL USE APPLICATION
City of Smiths Station
P. O. Box 250
2336 Lee Road 430
Smiths Station, AL 36877

(334) 297-8771 Office   Website www.smithsstation.us   (334) 448-84322 FAX

CERTIFICATION

Applicant / Property Owner:

I hereby certify and attest that this application is made with my approval, as property owner to the best of my knowledge and abilities, the information provided in this request is

Applicant / Property Owner Signature:_____

Date:_____

OFFICIAL USE ONLY

Amount Paid: $_____   Receipt No.:_____   Date:_____

Case Received by:_____   Case No.:_____

Signature:_____   Date:_____