

# **Department of Development and Engineering Services** Phone: (636) 498-6565 Fax: (636) 498-6575

### **CONDITIONAL USE APPLICATION**

Application No.:	Date Received:	Date Filed:	
OWNERSHIP INFORMA	TION:		
Property Owner:		<u>_</u>	
Owner's Address:	_ City, State, Zip:		
Telephone Number:	Fax Number:	Email:	
Date Property Acquired:	Utilities Provided	: (Water)(Sewer) (Missouri American, Duckett Creek, Private, Other)	
APPLICANT INFORMAT	TION:	(Missouri American, Ducken Creek, Frivaie, Omer)	
Name of Applicant(s):			
Applicant(s) Address:	City, State, Zip:		
Telephone Number:	Fax Number:		
Email:			
LOCATION OF PROJEC	Т:		
Address:			
Tax Parcel Number(s):			
Current Land Use:	Size of F	Parcel (Sq.Ft. or Acres):	
Legal Description of Property (	other than address):		
ZONING INFORMATION	<b>V:</b>		
Existing Zoning:	Proposed Use Category	ory:	

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REQ	UIRED DOCUMENTATION:	
	Application Fee (\$800.00). Please make a check payable to the City of Cottleville. <i>If the expenses exceed the amount of deposit, the applicant shall be obligated for payment of all such additional charges.</i>	
□ •	2 <u>folded</u> copies of a scaled map of the property, correlated with the legal description and clearly showing the location of the property.  IN ADDITION TO HARD COPIES, AN ELECTRONIC COPY OF ALL PLAN(S) ARE ALSO NEEDED.	
	A printed and electronic text formatted legal description of the property.	
	A printed and electronic text formatted list of adjacent property owners (within 185 feet) and their addresses must be provided.	
	The applicant is required to appear before the Commission.	
ADD	OITIONAL INFORMATION:	
	ecision to recommend approval or denial of the proposed conditional use shall be based on the ving criteria:	
A.	The use advances the goals, objectives, and policies of the City's Comprehensive Plan.	
В.	In consideration of requests for any conditional use permits, the Planning and Zoning Commission/Board of Aldermen shall require such conditions of use as it deems necessary to protect the best interests of the City and the surrounding property and to achieve the objectives of the zoning ordinance.	
C.	The use at the specified location will contribute to and promote the welfare and convenience of the public.	
D.	The use will not cause substantial injury to the value of other property in the neighborhood in which it is to be located.	
E.	The use shall not dominate the immediate neighborhood. In determining whether the conditional use will so dominate the immediate neighborhood, consideration shall be given to:	
	1. The location, nature and height of buildings, structures, walls and fences on the site and	
	2. The nature and extent of proposed landscaping and screening on the site.	
F.	The use can be developed and operated in a manner that is both visually compatible with the	

permitted uses in the surrounding area and protects or enhances the public view.

The use of landscaping, fencing, setbacks or other design features will help mitigate the

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5490 Fifth Street, Cottleville, MO 63304

visual impact of the proposed conditional use.

- G. Off-street parking and loading areas shall be provided in accordance with the standards set forth in the zoning ordinance.
- H. Adequate access roads or entrance and exit drives must be provided. (Minimum 25' for 2-way and 14' for 1-way traffic.)
- I. Adequate utility, drainage and other such necessary facilities must be provided.
- J. A time limitation may be required.

#### **APPLICATION AGREEMENT:**

By affixing signatures to this application form, the Applicant and Owner hereby verify that: they have reviewed the applicable zoning regulations; they are familiar with the specific requirements relative to this application; and they take full responsibility for this application.

The Applicant/Owner further agrees to allow the City of Cottleville to enter onto the subject property to install a sign informing of any Public Hearing that may take place with respect to the application and further agree to allow the agents of the City of Cottleville to enter onto the subject property to inspect the land and buildings.

I also certify that the information contained herein is correct to the best of my knowledge and belief. I understand this application, including any plans submitted, is public information. I authorize reproduction of any plans/reports for purposes of application processing and reporting.

Applicant's Signature	Print Name	Date	
This application is made with	n my full knowledge and con	sent.	
Owner's Signature	Print Name	Date	



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#### **FINDINGS OF FACT (For City Use Only):**

CON	ISISTENCY				
	Advances the goals, objectives, and policies of the City's Comprehensive Plan.				
	Advances the purpose and intent of the underlying zoning district.				
	Meets the requirements contained in the Zoning Code for the specific use				
OPE	RATIONAL IMPACTS				
	Noise				
	Odor				
	Traffic				
	Operational Schedule				
VISU	JAL IMPACTS				
	Visually compatible with the permitted uses in the surrounding area and protects or enhances the public view				
	Density				
	Scale				
	Screening/Buffers				
GEN	TERAL WELFARE				
	Essential, convenient, or desirable to preserve and promote the public health, safety, and general welfare.				
INFF	RASTRUCTURE				
	Access				
	Parking and Loading				
	Emergency Services				
	Utilities				
	Drainage				
Planı	ning & Zoning Signature Date Board of Aldermen Signature Date				