



Residential Conditional Use Application

APPLICANT INFORMATION

Name of Applicant: _____ Phone: _____

Mailing Address: _____

Applicant is: _____ Legal Owner _____ Contract Purchaser _____ Agent _____

DESCRIPTION OF SUBJECT PROPERTY

Legal Owner: _____ Phone: _____

Mailing Address: _____

Tax Lot No. _____ Township _____ Range _____ Section _____ Block _____

Address of Property: _____

General Location: Fronting _____ Side of _____
Name or Number of Road

DESCRIBE THE PROPOSED CONDITIONAL USE

EXISTING CONDITIONS

Zone: _____ Comprehensive Plan Designation _____

Present Use of Property _____

Is the property serviced by city sewer and water? _____

SUPPORTING REASONS FOR A CONDITIONAL USE REQUEST

The Brownsville Zoning Ordinance, Section 7.010 specifies criteria that must be addressed before granting a conditional use. Applicants must respond to the following criteria (refer to your site plan where appropriate):

1. The proposal is consistent with the applicable policies of the Comprehensive Plan, the applicable provisions of the zoning ordinance and other applicable policies, regulations, and standards adopted by the City of Brownsville.

2. The location, size, design and operating characteristics of the proposal will have minimal adverse impact on the livability, value, or appropriate development of abutting properties and surrounding area, considering such factors as:

A. Location, size, and bulk of buildings.

B. Location, size, and design of parking areas.

C. Screening, landscaping, exterior lighting, hours of operation, vehicular access, and similar factors.

3. The proposal will preserve those historical, archeological, natural, and scenic assets of significance to the community and the surrounding area.

4. The proposal will not place an excessive burden on street, sewage, water supply, drainage systems, parks, schools or other public facilities in the area.

ATTACHMENTS

1. A site plan, drawn to scale, showing the dimensions and arrangement of the proposed development.
2. Filing Fee.

STATEMENT

I (we) hereby certify that the foregoing statements and answers and any other information (such as maps and drawing) attached hereto are true and accurate to the best of my (our) knowledge and belief.

APPLICANT:

(Name printed) (Signature) (Date)

(Name printed) (Signature) (Date)

OWNER:

(Name printed) (Signature) (Date)

(Name printed) (Signature) (Date)

FOR CITY USE ONLY

Received By: _____ Date _____

Fee Received: _____ Receipt No: _____

City Administrator _____