



SPECIAL USE PERMIT APPLICATION – FORM B

<i>(For office use only)</i>	
Name of Development/Project	Project Number

Certain uses cannot be allowed generally in a particular zoning district, or in any zoning district, because of the impact their special character creates on surrounding areas. However, some special uses may be allowed under special conditions. These uses are listed in the Zoning Ordinance as Special Uses. Because a Special Use is compatible with the applicable zoning district only under special conditions, a Special Use Permit is required before any use listed in the Zoning Ordinance as a Special Use may be established.

- A. List specific Special Use approval that is being sought (*refer to Zoning Ordinance Table 3A for a list of Special Uses possible in each zoning district*).

- B. In evaluating the suitability of a proposed Special Use, the Plan Commission and City Council shall examine the following characteristics of the proposed use and its individual structures or components:

1. Location and orientation
2. Lot Size
3. Size of facility, including floor area, structure height, design capacity, and anticipated employment
4. Site design and arrangement
5. Provisions affecting on and off-site pedestrian and traffic movement, vehicle storage, and the passage of emergency vehicles
6. Appearance
7. Screening or landscaping
8. On or off-site buffering from incompatible uses with open spaces or transitional uses
9. Operations factors, such as hours of use or environmental controls
10. Other characteristics of the proposed use pertinent in the judgment of the Commission or Council to an assessment of the impact of the use on the area.

In recommending or granting approval or conditional approval of a Special use, the City Council and Plan Commission shall prepare written findings of fact that on the basis of the ten characteristics cited above, or changes to such characteristics that conditions to which the approval is made subject require, the proposes use will be compatible with existing uses in the area, and with the Permitted Uses in the zoning district, in the following ways. Please review and provide a written response indicating how these six characteristics/criteria will be impacted by the proposed Special Use:

1. Traffic

And adverse impact of types or volumes of traffic flow not otherwise typical in the zoning district has been minimized.

Applicant Response:

2. Environmental Nuisance

Any adverse effects of noise, glare, odor, dust, waste disposal, blockage or light or air, or other adverse environmental effects of a type or degree not characteristic of Permitted Uses in the zoning district, have been appropriately controls.

Applicant Response:

3. Neighborhood Character

The proposed use will fit harmoniously with the existing natural or man-made character of its surroundings and with Permitted Uses in the zoning district. The use will not have undue deleterious effect on the environmental quality, property values, or neighborhood character already existing in the area or normally associated with Permitted Uses in the district.

Applicant Response:

4. Public Services and Facilities

The proposed use will not require existing community facilities or services to a degree disproportionate to that normally expected of Permitted Uses in the district, nor generate disproportionate demand for new services or facilities as compared with the Permitted Uses, in such a way as to place undue burdens upon existing development in the area.

Applicant Response:

5. Public Safety and Health

The proposed use will not be detrimental to the safety or health of the employees, patrons, or visitors associated with the use nor of the general public in the vicinity.

Applicant Response:

6. Other Factors

The proposed use is in harmony with any other elements of compatibility pertinent in the judgment of the Commission or Council to the particular Special use or its particular location.

Applicant Response:

I HEREBY CERTIFY THAT THE ABOVE STATEMENTS AND ALL ACCOMPANYING STATEMENTS AND APPLICATION INFORMATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Signature of Applicant/Agent

(Print Name)

Date