



APPLICATION FOR A SPECIAL USE PERMIT

FEE: \$250

This is an application for a Special Use permit. The form must be completed in accordance with directions on the accompanying instructions and filed with the Zoning Administrator. Email completed application to Planning&Zoning@andoverks.gov.

(AN INCOMPLETE APPLICATION CANNOT BE ACCEPTED.)

1. Name of Applicant/Agent _____
Address _____ Phone _____
Email _____

Relationship of applicant to property is that of _____
(Owner, Tenant, Lessee, etc.)

2. Application is made for a Special Use to permit (describe request):

for property located at _____

and legally described as _____

total lot area: _____ square feet / _____ acres

in the City which is zoned as the _____

District.



3. Attach any relevant supporting documents to your submission. Relevant documents include, but are not limited to:

- a. A site plan of your property, depicting the proposed use;
- b. Pictures of the surrounding neighborhood; and/or
- c. Evidence that the Special Use is appropriate for the property and its surroundings.

4. The applicant herein or his/ her authorized agent acknowledges:

- a. That he/ she has received instruction material concerning the filing and hearing of this matter; and
- b. That he/ she has been advised of the fee requirements established and that the appropriate fee is herewith tendered; and
- c. That he/ she has been advised of his/ her rights to bring action in the District Court of the County to appeal the decision of the Andover Board of Zoning Appeals; and
- d. That all documents are attached hereto as noted in the instructions; and
- e. That the Andover Board of Zoning Appeals has the authority to require such conditions as are deemed necessary and reasonable in order to serve the public interest.

| | | | |
|-----------|------|----------------|------|
| Applicant | Date | Agent (if any) | Date |
|-----------|------|----------------|------|

OFFICE USE ONLY

Application number: **Z-SU**_____ - _____

Submission received: _____