



APPLICATION FOR A CONDITIONAL USE

FEE: \$150

This is an application for a Conditional 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 Conditional 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 Conditional Use;
- b. Pictures of the surrounding neighborhood; and/or
- c. Justification for the suitability of the property to the proposed use.

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: **BZA-CU**_____-_____

Submission received: _____