

**APPLICATION
TO THE CITY OF POPLAR BLUFF
PLANNING AND ZONING COMMISSION**

REQUEST FOR REZONING OR CONDITIONAL USE PERMIT

1. Name of Applicant: _____

2. Property Owner(s) _____

3. Address: _____ Telephone: _____

4. Requested Action: _____

5. Reason for request: _____

6. Property address/location: _____

7. Legal Description of property (attach if necessary): _____

8. Does property have utilities available (water, sewer and electrical)? _____

9. Current zoning of property: _____

10. Proof of ownership (please attach an Attorney's Title Opinion.)

Name _____	Occupation _____
Address _____	Phone _____
Name _____	Occupation _____
Address _____	Phone _____

11. List and/or attach all additional information you have for the Commission to consider (photographs, expert studies or reports, etc.)

12. Attach a list of property owners within 185 feet of the property. This can be obtained from the Butler County Assessor's Office in the Courthouse, at no charge.

Conditional Use Permit Request Only – attach additional sheets for responses to each question below.

1. Describe how the location of the site would not adversely affect the general welfare of the surrounding property owners.
2. Explain how the location would not result in an undesirable concentration of premises for similar establishments.
3. Explain how the proposed location of the site does not aggravate existing problems created by your use (e.g. littering, loitering, public drunkenness, noise, etc.)
4. Explain how your project result in a net employment gain?
5. Explain how the project will result in an increase in sales tax collected?
6. Is the project a unique business addition to the community? Explain.
7. Explain how the project will contribute to the long-term overall economic improvement of the area?

8. Explain how the project will result in a positive upgrade of the area?

As the applicant, I hereby assure the Commission that the above information is complete and accurate and represents all the evidentiary material I request the Commission to review. In addition, I hereby assure the Commission that I have read all of the pertinent zoning regulations concerning this request.

Signature of Applicant or Authorized Agent

Date

\$150.00 Fee (non-refundable) Date

Paid _____