

1 Riverfront Plaza, STE 320 / P.O. Box 708 Lawrence, KS 66044 (785) 832-7700 Fax: (785) 832-3110 www.lawrenceks.org/pds planning@lawrenceks.org

CONDITIONAL USE PERMIT APPLICATION

Unincorporated Territory-Douglas County

Application materials must be submitted, in both print and electronic formats, to the Lawrence-Douglas County Planning Office, at the address noted in heading.

If you are unable to provide the materials in electronic format please contact the Planning Office at 785-832-7700

Date of Pre-application Meeting:		Planner:		
PROPERTY INFORMATION	N			
Project name & description (if a	pplicable):			
Total site acreage:	Present zoning:		Proposed zo	ning:
Present land use:				
Proposed land use:				
Number and description of exist structures and improvements:	ting			
Legal description				
(May be attached as separate s	heet):			
Project address/General location:				
PROPERTY OWNER INFO	RMATION			
Property owner's name:				
Property owner's email:			Phone No.:	
Property owner's address:			City:	State:
APPLICANT'S INFORMAT	ION (if different	from owner's)		
Applicant's name				
Applicant's email:	Phone No.:			
Applicant's address:		City:	State:	

Please indicate the reason for requesting the conditional use permit. (Attach additional sheets if needed.)
REVIEW CRITERIA: In reviewing and making decisions on proposed conditional use permits, the Planning Commission and the Board of County Commissioners are required to consider the following criteria. The Zoning Regulations place the burden on the applicant to show that an application complies with such criteria. Please respond to the following criteria to the best of your knowledge. (Attach additional sheets if needed.) 1. Is the proposed use compatible with the nearby zoning and land uses?
2. Is the proposed use compatible with the character of the area?
3. Discuss the suitability of the property to the uses to which it is restricted and for the uses which are being proposed. (special consideration shall be given to properties in the AG-1 District that are well suited for agricultural uses)
4. What impact would the proposed use have on the natural environment?

5. Will the use cause significant adverse impacts on community facilities, the transportation network, or utilities in the area?		
6. Is the use in conformance with the comprehensi	ve plan or adopted plans for the area.	
SIGNATURES To be considered complete, the application must be owner authorization form must accompany the application.		
I/We, the undersigned am/are the (owner(s)), (duly authorized agent), (Circle One) of the aforementioned property. By execution of my/our signature, I/we do hereby officially apply for rezoning as indicated above.		
Signature:	Date	
Printed Name:		
Signature:	Date	
Printed Name:		

UTILITY COMPANIES AND OTHER REVIEW AGENCIES

WATER:				
[]	City Water			
[]	Rural Water: RWD # No. of meters			
[]	Well Water			
WASTE MANAGEMEN	NT:			
[]	Septic System			
[]	Sanitary Sewer			
ELECTRIC:	•			
[]	KCP&L			
[]	Kaw Valley Electric			
	Westar			
[]	Other			
TELEPHONE:				
[]	AT&T/Southwestern Bell			
[]	Sprint/Embarq			
[]	Other			
GAS COMPANY AND/OR GAS LINES CROSSING PROPERTY				
[]	Black Hills Energy/Aquila			
[]	Atmos Energey (aka: Greeley Gas, United Cities Gas Co.)			
[]	Kansas Gas Service			
	Magellan Midstream Partners			
	Southern Star Central Gas			
[]	Williams Pipeline Co.			
[]	Other			
List township the property is in:				
List fire district the p	roperty is in:			
Is property adjacent to State or Federal Highway? [] yes [] no				
Is property located within a drainage district? [] yes [] no				
If yes, which drainage	ge district:			
	Douglas County - Kaw			
	Wakarusa - Kaw			
	Wakarusa – Haskell - Eudora			
Is property located within the floodplain? [] yes [] no				
	vithin 3 miles of one of the following cities?			
[]	Baldwin City			
	Eudora			
ГЛ	Lecompton			
(PLEASE ATTACH C	COPY OF SURVEY IF AVAILABLE.)			



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OWNER AUTHORIZATION I/WE hereby referred to as the "Undersigned", being of lawful age, do hereby on this day of ______, 20 ___, make the following statements to wit: 1. I/We the Undersigned, on the date first above written, am/are the lawful owner(s) in fee simple absolute of the following described real property: (Enter or attach legal description) I/We the undersigned, have previously authorized and hereby authorize _____ ______ (Herein referred to as "Applicant"), to act on my/our behalf for the purpose of making application with the Planning Office of Lawrence/Douglas County, Kansas, regarding the subject property or portion thereof addressed as: . Such authorization includes, but is not limited to, all acts or things whatsoever necessarily required of Applicant in the application process. 3. It is understood that in the event the Undersigned is a corporation or partnership then the individual whose signature appears below for and on behalf of the corporation of partnership has in fact the authority to so bind the corporation or partnership to the terms and statements contained within this instrument. IN WITNESS THEREOF, I, the Undersigned, have set my hand and seal below. Owner Owner STATE OF KANSAS COUNTY OF DOUGLAS The foregoing instrument was acknowledged before me on this _____, day of _____, 20 ___, by_____ My Commission Expires:

Notary Public