



REGISTRATION of a NONCONFORMING USE

Application Requirements

This checklist has been provided to assist you, the applicant, as you prepare your application. Submission of less information than necessary to adequately review and process your application will delay the review process.

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General Submittal Requirements

❖ Application Form

- ☐ A complete Application Form.
 - Page 1 – Contact information property summary
 - Page 2 – Signature Page

❖ Attachments Required

- ☐ Owner Authorization Form if applicant is not the legal owner of the property



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:

See "Exhibit A, Legal Description" attached hereto and incorporated herein by reference.

2. 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 _____ (common address), the subject property, or portion thereof. 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 or 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



APPLICATION Registration of a Nonconforming Use

OWNER INFORMATION

Name(s) _____
Contact _____
Address _____
City _____ State _____ ZIP _____
Phone (____) _____ Fax (____) _____
E-mail _____ Mobile/Pager (____) _____

APPLICANT/AGENT INFORMATION *(if different from above)*

Contact _____
Company _____
Address _____
City _____ State _____ ZIP _____
Phone (____) _____ Fax (____) _____
E-mail _____ Mobile/Pager (____) _____

PROPERTY INFORMATION

Address of Property _____
Present Zoning District _____
Present Land Use and Date Use Established _____

Legal Description *(may be attached)* _____

Number and Description of Existing Improvements or Structures _____



SIGNATURE

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 register the Nonconforming Use as indicated above.

Signature(s): _____ Date _____

_____ Date _____

_____ Date _____

Note: If signing by agent provide Owner Authorization sheet.

STAFF USE ONLY

Application No. _____

Date Received _____