

TOWN OF WALNUT COVE

APPLICATION FOR SPECIAL USE/CONDITIONAL USE PERMIT

Application No. _____ Date: _____

Permit Fee: _____ \$300 _____ Receipt # _____

Type of Permit: _____ Special Use Permit _____ Conditional Use Permit

Applicant: _____ Owner: _____

Address: _____ Address: _____

Telephone No.: _____ Telephone No.: _____

Legal relationship of applicant to property owner: _____

Purpose of permit: _____

Property location: _____

Street Address

Tax map: _____ Block: _____ Lot: _____

Lot size: _____ square feet: _____ Zoning district: _____

No. of buildings to remain: _____ Gross floor area to remain: _____

No. of buildings proposed: _____

Gross floor area of proposed buildings: _____

Estimated cost of project: \$ _____

Attach site plan

Signature of Applicant

Date