



# CONDITIONAL USE APPLICATION

APP #: \_\_\_\_\_  
DATE RECEIVED: \_\_\_\_\_  
HEARING DATE: \_\_\_\_\_

## Application Requirements

This application must be completed and submitted with application fee and ALL required attachments.  
(Checks payable to the City of Palatka)

### Required Attachments:

- |  |  |
|--|--|
| <input type="checkbox"/> Site Plan   | <input type="checkbox"/> Copy of Recorded Deed   |
| <input type="checkbox"/> Letter of Authorization                                 | <input type="checkbox"/> Fees                    |
| <input type="checkbox"/> Legal Description                                       | <input type="checkbox"/> Justification Statement |
| <input type="checkbox"/> Dept. of Children & Family Services Letter (if daycare) | <input type="checkbox"/> Tree Survey             |

## Property Information

1. Property Address: \_\_\_\_\_
2. Parcel Number: \_\_\_\_\_
3. Current Property Use: \_\_\_\_\_
4. Lot Size: \_\_\_\_\_
5. Current Zoning Designation: \_\_\_\_\_
6. Number & types of structures on property: \_\_\_\_\_
7. Closest Intersecting Streets: \_\_\_\_\_
8. Description of proposed Conditional Use requested:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Applicant Information

**Owner Name(s):** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

**Agent/Contractor** (Submit proof of authorization to act as agent with your application)

Name(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

**To Be Notarized**

Name (Print Name): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

STATE OF \_\_\_\_\_ County of \_\_\_\_\_

Before me this day personally appeared \_\_\_\_\_ who executed the foregoing application and acknowledged to and before me executed this document for the purposes therein expressed.

WITNESS my hand and official seal, this \_\_\_\_\_ day of \_\_\_\_\_ A.D. \_\_\_\_\_.

(Notary Seal)

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_ State of \_\_\_\_\_ at Large  
Type of Identification Produced: \_\_\_\_\_

**Official Use Only**

1.DATE SUBMITTED: \_\_\_\_\_

2.RECEIVED BY: \_\_\_\_\_

3.CURRENT ZONING: \_\_\_\_\_

4.FUTURE LAND USE CATEGORY: \_\_\_\_\_

5.PRELIMINARY REVIEW BY: \_\_\_\_\_