

Application for a Special Use Permit

Fill out application completely. Use additional sheets if needed.

Filing Fee is \$100.00

Date: _____

1. Applicant's name: _____

2. Applicant's address: _____

3. Telephone: _____ (day time) _____

4. Present use of property: _____

5. Desired use of property: _____

6. Present Zoning: _____

7. Legal Description: _____

8. Under what provisions of the Zoning regulations are you seeking this permit:

9. Explain in detail what you propose to do: (use additional sheets to show drawing of parcel and locations of structures)

10. How are adjoining properties used? Indicate both zoning district and actual uses.

North: _____

South: _____

East: _____

West: _____

Owner's/Agent signature

Kearney County Zoning Administrator
1124 East 9th
Minden, NE 68959

Phone: 308-832-2854

email: kcweed@gtmc.net

Fax: 308-832-0401