

APPLICATION FOR SPECIAL EXCPTION BOYD COUNTY, NEBRASKA

This portion to e filled out completely by Applicant

1. Under the provisions of Article 9 of the Boyd County Zoning Regulations, the undersigned hereby applies for approval of a Special Exception to establish the following use:

_____ on the following real estate (provide legal description of real estate to be affected by this application):

2. Provide a site plan which describes the use proposed which includes all of the following information:

A. The size location and height of all existing and proposed buildings and structures involved in the proposed special exception use and the distances of such buildings from the centerlines of any adjoining road or property line and the distance between buildings.

B. The location(s) of access(s) to public roadways.

C. The types and locations of any easements affecting the property.

D. The location and type of water supply and sewage disposal facilities.

E. The number and location of parking spaces for customers or the public.

F. The location and loading areas.

G. The type and location of refuse collection and storage facilities.

H. The locations of residential dwellings and other non-agricultural land uses within (1) mile of the property to be affected by the special exception use.

I. An indication of proposed surface water drainage onto, through and off of affected property.

J. The type and size and location of all signs associated with such proposed use.

K. Any areas of the property that are subject to flooding or considered wetlands.

3. Provide a written description of the use proposed and the activities involved (on separate sheet).

4. I hereby certify that i have the legal authority to file this application, that I have completed and examined this application and know the same to be true and correct .I further certify that all provisions of law and other regulation governing the type of construction and use proposed in this application will be complied with, whether or not specified in this application, including any building, electrical, or codes.

Printed Name of Applicant

Mailing Address of Applicant

Signature of Applicant

Date of Application

Telephone of Applicant

Sketch scaled Site Plan here (or attach scaled drawing(s):

APPLICATION FOR ZONING
BOARD COUNTY BOARD

The Board of Commissioners of the County of...

has considered the application of...

and has determined that...

it is the order of the Board...

that the application be...

approved on the following...

conditions:...

It is the order of the Board...

that the application be...

disapproved on the following...

This Section to be completed by Zoning Administrator

1. Application No. ____-19____ 2. Date application received: _____, 19____

3. Fee in the amount of \$_____ paid by applicant

4. Action taken by County Board of Commissioners:

Approve

Conditionally Approve

Conditions of Approval: _____

Disapprove

5. Notice of Decision of County Board of Commissioners mailed to Applicant on _____, 19____

Signature of Zoning Administrator