

TOWN OF FRANKLINTON
SPECIAL USE PERMIT APPLICATION

Date Application Submitted: _____

Applicant Name(s):

Contact Name and Mailing Address:

Contact Phone Number: _____

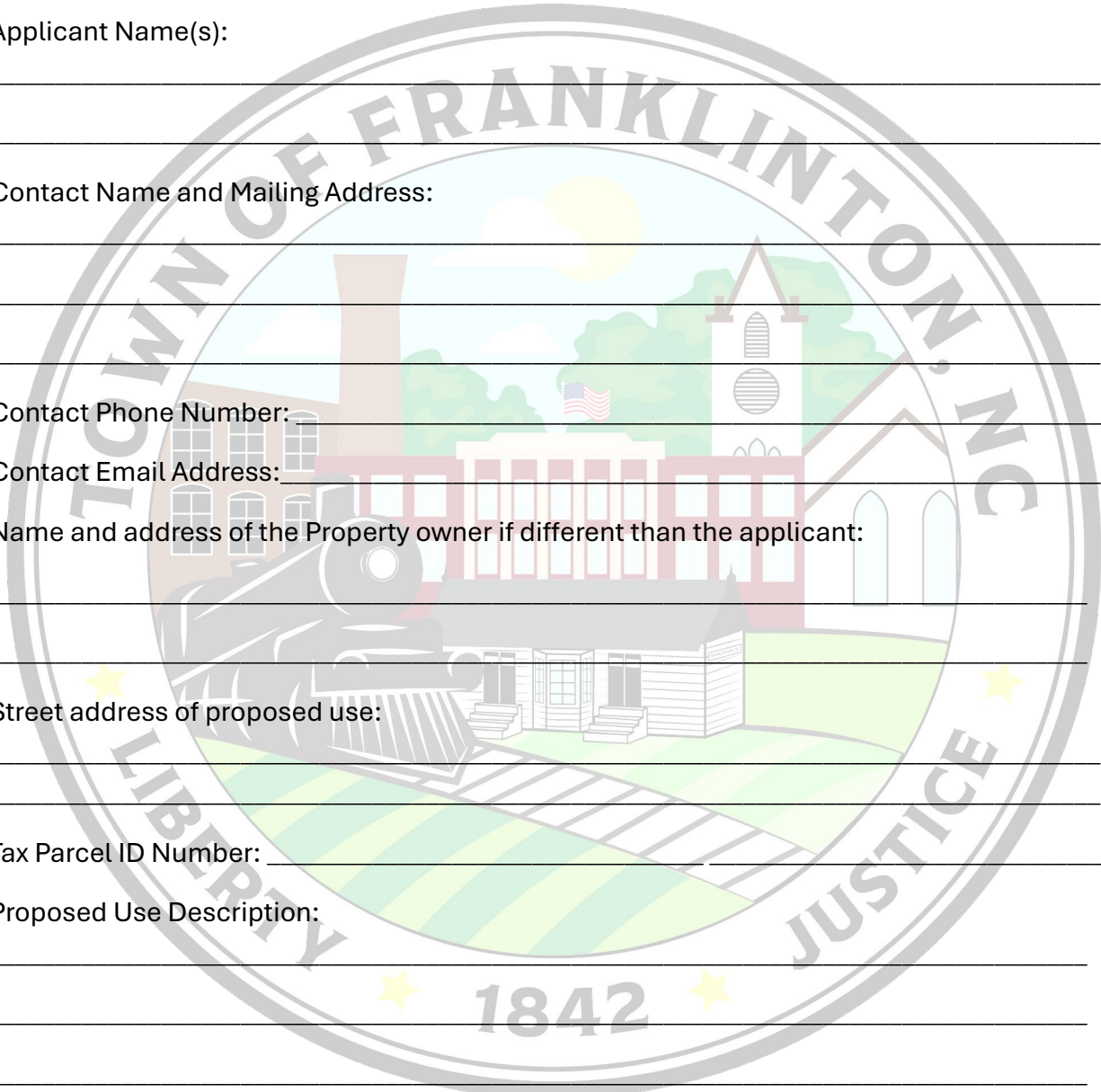
Contact Email Address: _____

Name and address of the Property owner if different than the applicant:

Street address of proposed use:

Tax Parcel ID Number: _____

Proposed Use Description:



Items to be submitted with application:

1. Application Fee
2. List of all property owner names and addresses of properties abutting the Property. Properties are "abutting" even if separated by a street, railroad, or other transportation corridor.
3. GIS map of the Property
4. Site Specific Development Plan including general design of interior of the building.

STATEMENT OF JUSTIFICATION

Provide testimony as to how the proposed special use will meet the following general Approval Criteria of Section 2.4.16 of the Unified Development Ordinance (attach additional pages if needed):

(a) The use will not materially endanger the public health, safety, or general welfare if located where proposed and developed according to the plan as submitted and approved:

(b) That the use meets all required standards, conditions and specifications of the UDO (please see specific section of UDO applicable to your proposed use – these may be provided by Staff upon request):

(c) The proposed use will be harmony with the area in which it is to be located:

(d) The proposed use will be in general conformity with the Town's adopted Land Use Plan:

(e) The proposed use is configured to ensure pedestrian and vehicular safety:

(f) The proposed use will not result in conditions where public facilities and services are inadequate to serve the proposed use:

Please provide any information you feel will be necessary or helpful for the Town Board of Adjustment in rendering their decision. Certain Special Use Permits require other, more specific findings in addition to those listed above.

Applicant Certification

NOW COMES _____, Applicant, being first duly sworn, and deposes and says as follows: the contents of this application and all attached documents are true to my knowledge, except as to those matters stated on information and belief, and as to those matters I believe them to be true.

This the _____ day of _____, 20____.

Print Applicant Name: _____

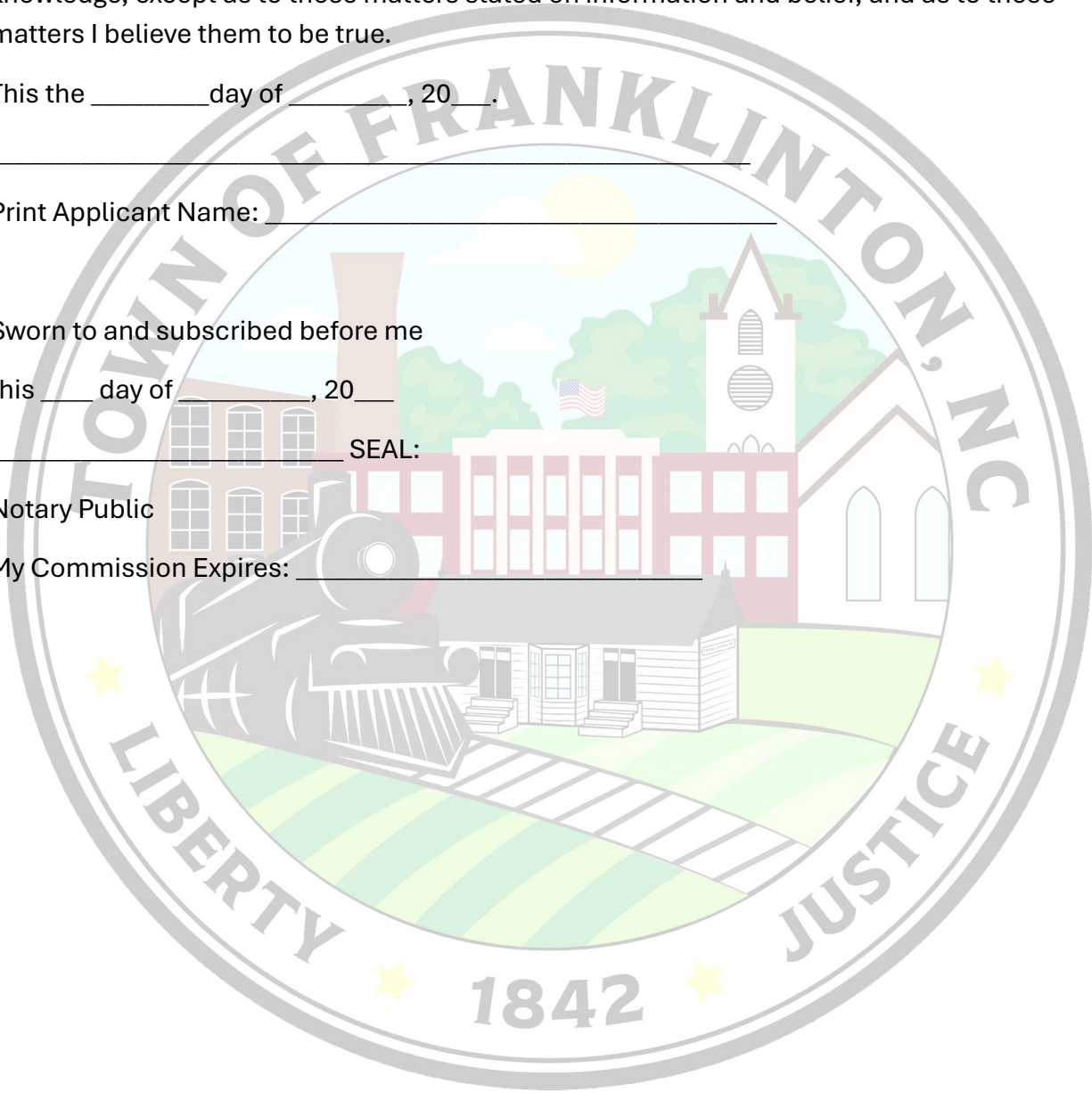
Sworn to and subscribed before me

this _____ day of _____, 20____

SEAL:

Notary Public

My Commission Expires: _____



Owner Certification

NOW COMES _____, Owner (if different from Applicant), being first duly sworn, and deposes and says as follows: the contents of this application and all attached documents are true to my knowledge, except as to those matters stated on information and belief, and as to those matters I believe them to be true.

This the _____ day of _____, 20____.

Print Applicant Name: _____

Sworn to and subscribed before me

this _____ day of _____, 20____

SEAL:

Notary Public

My Commission Expires: _____

