



ST. CHARLES PARISH

DEPARTMENT OF PLANNING & ZONING

APPLICATION FOR PUBLIC HEARING SPECIAL PERMIT USE

PZSPU CASE #: _____ **DATE SUBMITTED:** _____

RECEIPT #: _____ **ZONING DISTRICT:** _____

APPLICANT: _____ **PHONE #:** _____

MAILING ADDRESS:

PROPERTY OWNER (S):

ADDRESS: _____

PHONE #: _____

**MUNICIPAL ADDRESS OF AFFECTED PROPERTY
(OR GENERAL LOCATION, IF NO MUNICIPAL ADDRESS IS ASSIGNED):**

PROPERTY IS LOCATED ON THE (N, S, E, W) SIDE OF _____
STREET, APPROXIMATELY _____ **FEET (N, S, E, W) OF** _____
_____ **STREET (NEAREST INTERSECTING STREET).**

SUBDIVISION : _____

SQUARE #: _____ **LOT #:** _____

ACREAGE OR PROPERTY SIZE (SQUARE FEET): _____

FLOODPLAIN DESIGNATION: _____

PRESENT USE OF PROPERTY AND STRUCTURES THEREON:

CONTEMPLATED USE:

HAS ANY PREVIOUS APPLICATION BEEN MADE TO THE PLANNING AND ZONING COMMISSION RELATIVE TO THE AFFECTED PROPERTY? **Yes** **No**

TYPE OF APPLICATION: _____

CHECKLIST OF APPLICATION REQUIREMENTS:

- 1.** Complete application, signed by applicant and/or appropriate property owners, and duly notarized. If property owner is a corporate entity, the application must be signed by an authorized corporate representative and must be accompanied by a corporate resolution.
- 2.** Complete abutting property owner form (information can be obtained from the Assessor's Office).
- 3.** Site plan of affected property showing existing and proposed structures. Plan must show lot dimensions, existing structural dimensions, proposed structural dimensions, and appropriate setback distances.
- 4.** Paid fee of \$40 (check/money orders made payable to the St. Charles Department of Finance).

PLANNER CERTIFICATION OF APPLICATION _____

(COPY OF SPECIAL USE CRITERIA HAS BEEN PROVIDED TO THE APPLICANT)

(Signature)

OWNER'S ENDORSEMENT

STATE OF LOUISIANA

PARISH OF ST. CHARLES

I, _____ being duly sworn, deposes and states (i) that he or she is the owner of the property described in this application; (ii) that all of the statements contained in this application are true to the best of his or her knowledge and belief; and (iii) that he or she authorizes the foregoing petition.

Signature of Property Owner

Subscribed and Sworn to before me this _____ day of _____, 200__,
In my office at _____, Louisiana.

Signature of Notary

(SEAL)

ABUTTING PROPERTY OWNERS

List names and addresses of **each owner** of property abutting the subject application parcel:

NAME OF PROPERTY OWNER(S)	ADDRESS OF PROPERTY OWNER(S)
1. _____	_____ _____
2. _____	_____ _____
3. _____	_____ _____
4. _____	_____ _____
5. _____	_____ _____
6. _____	_____ _____
7. _____	_____ _____
8. _____	_____ _____
9. _____	_____ _____
10. _____	_____ _____
11. _____	_____ _____
12. _____	_____ _____

IF THERE ARE MORE THAN TWELVE ABUTTING PROPERTY OWNERS LIST THEIR NAMES AND ADDRESSES ON AN ADDITIONAL SHEET(S) OF PAPER AND ATTACH.