



Application For Conditional Use

To: Board of County Commissioners
Mineral County Planning and Zoning Commission
Creede, Colorado 81130

Application is hereby made for a Conditional Use review under Mineral County Zoning Regulations, in support of which, the following information is submitted, pursuant to sections 3.2(A) and 11.2 of said regulations.

A. Provide a legal description of the land area to which the conditional use applies:

B. Describe the Conditional Use requested:

C. What is the zoning in the area of the requested conditional use: _____

D. Provide a site plan, drawn to scale, of the area and existing zoning in all adjacent areas. If applicable, provide a description of buildings and uses in adjacent areas within 200 feet of the property line. Attached separate sheet for this information.

E. Provide a list of owners of abutting properties and properties located within three hundred feet of the property line along with the current addresses of such owners. Attach separate sheet for this information.

F. Provide an estimated time schedule for any contemplated construction or use: _____

G. Why do you believe a new business or industrial use is needed in this area:



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H. Identify the ownership of the land for which the conditional use is being requested, whether by deed or contract:

I. Describe any effect the conditional use would have on adjacent properties:

J. Does this application comply with all applicable sections of Article 2 of said Regulations?

Yes No

List any exceptions:

K. All applicants shall be prepared to answer questions which might be required in section 3.3(B).

L. Have you read and do you understand Sections 3.3(C)?

Yes No

M. To which section of Article 2 (the type of conditional use) does this application apply:

N. Attach any additional information you feel will assist in the evaluation of this request.



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I/We submit a nonrefundable processing fee in the amount of \$400.00 and agree to pay the total actual costs incurred in review and approval or denial of this application including hearings therefore.

MAKE ALL CHECKS PAYABLE TO MINERAL COUNTY

Signature of Applicant: _____

Address: _____

Phone Number: _____

Date: _____