



Special Use Permit Application

155 W. Front Avenue, PO Box 186, Stockton, IL 61085
Phone 815-947-2515 FAX 815-947-3413

Fee \$ 200.00

Notice to Applicant: All blanks must be filled in. Decisions regarding a Special Use may require up to 90 days after the conclusion of the public hearing.

For Office Use Only

Date of: Request _____ Published Notice _____ Hearing _____

Newspaper(s) of Hearing Publication _____ Comments _____

Do Not Write in this Space

Action taken by the Board: Special Use Recommended Not Recommended Dismissed Continued

Action taken by the City Council: Granted Denied

Identification

Owner _____ Address _____ Phone _____

Applicant _____ Address _____ Phone _____

Location of Structure or Property

At (Location): _____ Zoning District: _____ In the Floodplain? _____

Subdivision: _____ Lot _____ Block _____ Lot Size _____

Property Description

Legal Description _____

Width _____ Length _____ Total Square footage _____ Present Use _____

Reasons For Request

Note: Answer all questions. If additional space is required, attach extra pages to the application

1. Describe in detail the proposed use. _____

2. Are there other sites for the proposed use? Yes No Explain _____

3. Is the proposed use contrary to the established land use pattern? Yes No

4. Would the proposed use contribute to dangerous traffic patterns or congestion? Yes No

5. Is the proposed use in the Public Interest? Explain _____

6. Will the change adversely influence living conditions in the vicinity? Yes No

7. Will property values in the vicinity be affected by the change? Yes No

Names of owner or owners of any land adjacent to or immediately across any street, alley, or public right-of-way from the property proposed as a special use.

Name	Address
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

I hereby certify that the statements and the statements contained in any papers or plans submitted herewith are true to the best of my knowledge and belief.

_____	_____	Date _____ / _____ / _____
Signature of Applicant	Print Name	
_____	_____	Date _____ / _____ / _____
Signature of Owner (REQUIRED)	Print Name	