



City of Scottsbluff, Nebraska Special Use Permit Application

Date:			DO NOT WRITE IN THIS BLOCK	
Address (Location) of requested Special Use:			Permit Number:	
Applicant's Name			Special Use Permit Approved Denied	
Applicant's Address:			Date Issued:	
City:	State:	Zip:	Comp. Plan Land Use:	Zone:
Telephone:	Mobile:	Email:	Attached: Plot Plan Legal Description (in Word) \$100.00 filing fee \$3.00 per property owner within 300-feet Receipt # _____	
Property Owner:				
Property Owner's Address:				
City:	State:	Zip:		
Telephone:	Mobile:	Email:		
Description of the nature of the use for which the Special Use Permit is requested (Why and What):				
Legal Description:				
Zoning Ordinance Section pertaining to Special Use Permit:				
Please attach the following: Copy of Plot Plan (showing property lines, dimensions, existing structures, proposed structures, easements, etc.. Legal Description on a CD/Disk (in Word) \$100.00 filing fee				
I, the undersigned, hereby certify that I agree to be bound by all requirements of the ordinances of the City of Scottsbluff and any other conditions that may be place concerning the use for which a Special Permit is requested. I have also read and am familiar with the City Ordinances and will comply with these requirements; and that the statements herein contained are true and correct to the best of my knowledge and belief.				
Property Owner(s) of Record:			Date:	
Applicant's Signature:			Date:	
Remarks: (Insert here any information not covered above)				

