## SPECIAL EXCEPTION USE PERMIT APPLICATION

nte:	Fee:		(If applicable)
Owner/Applicant: Name:			
(Last)	(First)		(Initial)
Address:			
Address:(Street & No.)	(City)	(State)	(Zip)
Telephone:			
(Home)	(Office)		
Request is for a Special Use Pe	ermit to (Specify Use):		
Legal Description of Property:	:		
Address of Property:			
Present Use and Zoning of Pro	perty:		
Attach an Accurate Drawing S	Showing:		
a) Property boundary lines	d) Existing zoning on the a	djacent prope	ties
<ul><li>b) Existing structures</li><li>c) Location of abutting streets</li></ul>			antias
SEE 201.502 OF THE ZONING OR	,		
Names and Addresses of all oth equitable Interest in the prope	<u> </u>		
I hereby give permission for th	ne Township representatives	to visit the	site.
Owner/Applicant Signature:			
X	Date:		
X	Date		