



ZONING PERMIT APPLICATION

(Please type or print)

APPLICANT:

Property owner (if not applicant):

Name: _____

Name: _____

Mailing _____

Mailing _____

Address: _____

Address: _____

City: _____

City: _____

State _____ Zip Code _____

State _____ Zip Code _____

Home phone () _____

Home phone () _____

Business phone () _____

Business phone () _____

Agent's name _____

Being the owner of the project location, I hereby authorized this application.

Mailing _____

Address _____

_____ Date _____ Owner's Signature

Business phone() _____

Project location: _____

Assessor's parcel number(s): _____

Address _____

A.P.#: _____

City or area _____

Present use of land _____

Type of zoning permit requested _____

DESCRIPTION OF PROPOSED USE: Please complete a project description on page 3 and site plan on page 4.

FOR DEPARTMENT USE ONLY

Received by _____ Date accepted _____ Receipt Number _____

Zoning _____ General Plan _____ Permitted by Sec. 27.3 ()

A.P. Number(s): _____ - _____ - _____

This zoning permit shall be subject to the following terms and conditions:

1. The applicant agrees to obtain all applicable building, health, and public works department permits, and agricultural clearances upon issuance of the zoning clearance.
2. The applicant shall comply with the conditions of Section 21-27.3 ().
3. The approved use shall be operated at all times in conformance with the attached conditions of Section 21-27.3 () and as described in the zoning permit application pages 3 and 4.
4. The Planning Commission may revoke the permit in the future if the Commission finds that such permit was obtained by fraud; that one or more of the terms or conditions upon which such permit was granted has been violated; or that the use for which the permit was granted is so conducted as to be detrimental to the public health, safety, or general welfare or as to be a nuisance.
5. The permittee shall permit the County of Lake or representative(s) or designee(s) to make periodic inspections at any reasonable time deemed necessary in order to assure that the activity being performed under authority of this permit is in accordance with the terms and conditions prescribed herein.
6. This permit shall become null and void if not issued within a two (2) year period of time, or if the use is abandoned for a period of two (2) years.

ACCEPTANCE

I have read and understand the conditions of Section 21-27.3 () and the foregoing zoning permit and agree to each and every term and condition thereof.

Date

Signature of applicant or agent

FOR DEPARTMENT USE ONLY

The Community Development Director has determined that the zoning permit requested does (), does not () meet the requirements of Section 21-49.4 of the Lake County Code and hereby issues (), denies () said zoning permit.

Date: _____

By: _____

Title: _____

Comments: _____

ZONING PERMIT SITE PLAN



In the space provided above, please provide a site plan for the proposed zoning permit use. Site plans should be drawn approximately to scale and should include the following items, when applicable:

- a. A north arrow
- b. Approximate lot dimensions and lot lines
- c. Location, function and approximate size of all existing and proposed buildings on the property
- d. Location of driveway and parking areas
- e. Adjacent public and private streets
- f. For proposed dwellings and offices, the type and location of existing and proposed waste disposal and water services, and the dimensions (setbacks) between buildings and between buildings and lot lines.