Conditional Use Permit Application

Trimble County Fiscal Court
Board of Adjustments
PO Box 251
Bedford, KY 40006
Telephone: (502) 255-7196 Fax: (502) 255-4618

For Office Use Only:
Date Filed: _____

Filing Fees: $ _____

Hearing Date: _____

Please type or print (blue or black ink) Application Date: _____

Instructions	Applicant Information
Applicant must be all owner(s) of the property.	**Applicant/Owner Name: _____** Mailing Address: _____ City: _____ State: _____ Zip Code: _____ **Co-Applicant/Developer Name: _____** Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Instructions	Property Information
If an actual street address is not available, identify the property's location along the roadway and distance to intersecting public roadways on each side of the property. Describe the property's current zoning classification and how the property is presently used.	Street address: _____ Lot#/Subdivision Name (if applicable): _____ Property Location: The subject property is located _____ _____ _____ Parcel: _____ PVA#_____ Existing Zoning: _____ Existing Use: _____ Is this application in conjunction with Article XII or Article XIII? If yes, complete box 4 & 5; if no, skip box 5 Is this application in conjunction with a Zoning Map Amendment? If yes, ☐ I agree to allow the Planning and Zoning Commision to rule on both the Variance and Zoning Map Amendment. ☐ I **DO NOT** agree to allow the Planning and Zoning Commision to rule on both the Conditional Use and Zoning Map Amendment.

Instructions	Conditional Use Description Information
Describe the proposed Conditional Use to be conducted and address the guidelines of the Zoning Ordinance Regulations. Specify the use, size, scope and hours of operation, maximum occupancy, parking, signage, if applicable. Use additional sheets if necessary.	Provide a detailed description of the proposed conditional use to be conducted. State the reasons for locating the proposed use at the specific location and identify the need for and the benefits of the proposed use to the community or neighborhood.
Specify the Zoning Ordinance provision requiring a Conditional Use Permit.	Provision of Zoning Ordinance allowing for a Conditional Use Permit: Section : _____
If yes, specify action type (zoning map amendment, conditional use permit, variance or appeal.)	Has this property been the subject of previous action by the Board of Adjustments or by the Planning Commission: _____

Instructions	Conditional Use Permit Justification
The Board of Adjustments may approve, modify, or deny any application for a conditional use permit. If it approves such permit it may attach necessary limitations, requirements that one (1) or more things be done before the request can be initiated, or conditions of continuing nature. (KRS 100.237(1))	Provide written justification for the conditional use (use additional pages, if necessary): 1. Describe how the proposed conditional use will blend with the surrounding uses and state the reasons why the proposed use is not a detriment to the area.
Discuss how the proposed use is suitable and will be properly integrated into the community.	2. Indicate where the proposed use will be served by adequate onsite public or private utilities.
Conditional Use Permits must meet all requirements listed for the conditional uses permitted in each specific zone.	3. Discuss the ingress/egress and address the availability of parking and internal traffic circulation to accommodate the proposed conditional use. 4. Specify how the proposed use satisfies the additional requirements listed in the specific zone and is in agreement with the zoning ordinance.

Required Supporting Documentation (Box 4)

_____ 1. Two (2) copies no larger than 24" x 36" and two (2) copies no larger than 11" x 17" of a Development Plan drawn by a land surveyor or engineer noting placement of the structure, location of road, parking spaces, loading spaces, utility easements, drainage, landscaping and any other pertinent information.

_____ 2. A copy of the deed or Property/Map card from the PVA.

_____ 3. A drawing of proposed use if necessary.

_____ 4. Conditional Use Permit filing fee, payable to Trimble County Fiscal Court.

Required Supporting Documentation (Box 5)

_____ 1. Everything in box 4, plus the following:

_____ 2. Print out of all names and mailing address for all adjoining property owners within, contiguous to, and directly across the street. Adjacent property information shall be obtained from PVA office.

_____ 3. Approval for entrance from the appropriate agency.

_____ 4. Approval for sewage disposal.

Applicant/Owner Certification

I do hereby certify that the information provided herein is both complete and accurate to the best of my knowledge, and I understand that any inaccuracies may be considered just cause for invalidation of this application and any action taken on thi application. I further certify that I am the owner of the property for which the conditional use permit application is filed.

Signature of Appliant & Owners: Title: Date:

_____ _____ _____

_____ _____ _____

_____ _____ _____

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Date Application Received: _____ Received by: _____

Filing Fee Paid: $ _____ Cash _____ or Check #_____

Notice to Newspaper (Date): _____ Adjacent Mailings (Date): _____
Public Hearing (Date): _____ BoA Meeting (Date): _____
Approval Signature: Date:
_____ _____

Denial (Reason): _____
_____