

Village of Malta

APPLICATION FOR SPECIAL USE PERMIT

PART I. Applicant Information

APPLICANT *(Please Print or Type)*

Name: _____

Address: _____

Phone: (_____) _____ - _____ Fax: (_____) _____ - _____

CONTACT PERSON *(If different from Applicant)*

Name: _____

Address: _____

Phone: (_____) _____ - _____ Fax: (_____) _____ - _____

IS THE APPLICANT THE OWNER OF THE SUBJECT PROPERTY? YES [] NO []

(If the Applicant is not the owner of the subject property, a letter from the Owner authorizing the Applicant to file must be attached to this application).

IS THE APPLICANT AND/OR OWNER A TRUSTEE OR A BENEFICIARY OF A LAND TRUST? YES [] NO []

(If the Applicant and/or Owner of the subject property is a Trustee of a land trust or beneficiary(ies) of a land trust, a disclosure statement identifying each beneficiary of such land trust by name and address and defining his/her interest therein shall be verified by the Trustee and shall be attached hereto).

PART II. Property Information

ADDRESS OF PROPERTY: _____

PARCEL INDEX NUMBER(S): _____

LEGAL DESCRIPTION: _____

A legal description must be provided or attached to this application

Is the property in question currently subject to a zoning variation or a Special Use Permit? YES [] NO []

If so, please describe its nature: _____

Is the property in question currently non-conforming in any respect? YES [] NO []

If so, please describe its nature: _____

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PART III. Reasons for the Request

1. The Nature of the proposed use, including type of activity, the manner of operation, the number of occupants or employees, and similar matters: *(Please Print or Type; Attach additional pages if necessary)*

2. The location of the proposed use or structure and its relationship to existing adjacent uses or structures:

3. The area and dimensions of the site for the proposed structure or uses:

4. Existing topography of the site (one-foot or two-foot contour), and proposed finish grade:

5. The existing and proposed screening, landscaping, and erosion control features on the site, including the parking area and the height and setbacks of any proposed structures.

6. The number and size of any proposed dwelling units:

7. The location and number of the proposed parking/loading spaces and accessways and estimate of daily traffic counts to the area.

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I certify that all of the above statements and the statements and information contained in any papers, plans and other documents submitted herewith are true to the best of my knowledge and belief.

Applicant's Signature

Date

Subscribed and sworn before me

By: _____

this _____ day of _____, 20____.

Notary

PROPOSED HEARING DATE: _____

DEADLINE FOR APPLICATION _____

Application and Affidavit of Notification must be received by deadline or hearing date will be postponed to a later date.

APPLICANT: On the next page is a sample of an *Affidavit of Notification* as a requirement of the Zoning Code and State laws. You must notify all property owners within 250 feet of the property of your intent to apply for a Special Use, with detail of what you are proposing in your application and your public hearing date. You must forward a copy of the notification letter that you send out along with the *Affidavit of Notification* to the Village of Malta. It is in your best interest to get this done immediately, your application will not be accepted or hearing scheduled until this has been completed. Note: the letters must be sent by certified mail.

AFFIDAVIT OF NOTIFICATION

Village of Malta

TO BE USED FOR SPECIAL USE PERMIT

To: Village of Malta, 120 S. Third Street, Malta IL 60150

From: _____ petitioner(s)

Date: _____

The undersigned certifies that the list below includes the names and addresses of all owners of property within 250 feet of proposed Application and, further, that all persons owning property which is within 250 feet of the proposed Application have been notified by certified mail of the intention of the Petitioner(s).

The property is located at _____. A legal description is attached hereto.

PROPERTY INDEX #	PROPERTY OWNER	ADDRESS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Attach additional sheets, if necessary.

Subscribed and sworn before me

By: _____

this _____ day of _____, 20_____.

Notary

PROPERTY OWNER NOTIFICATION

Village of Malta

Notification to property owners within 250' of proposed Zoning Variance Property

Property Owner:

Name _____

Address _____

City, State _____

Applicant for Special Use Permit:

Name _____

Address _____

City, State _____

Dear Resident: You are being notified of a Public Hearing regarding my application for a Special Use on property located at:

My intention is to request a Special Use to allow:

The hearing date is scheduled for: _____

You may call me at _____ if you have any questions regarding my application.

Sincerely,

Applicant

(use this letter of notification or create your own letter with the above information)