

DO NOT WRITE IN THIS SPACE

Date Submitted \_\_\_/\_\_\_/20\_\_\_ Public Hearing \_\_\_/\_\_\_/20\_\_\_ Present Zoning\_\_\_\_\_ Application No \_\_\_\_\_

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## APPLICATION FOR A STANDARD CONDITIONAL USE PERMIT

\_\_\_ Madison County \_\_\_ Pierce County \_\_\_ Battle Creek \_\_\_ Madison City \_\_\_ Meadow Grove \_\_\_ Newman Grove \_\_\_ Tilden

### DIRECTIONS:

1. Fill out the form completely. Please print or type or electronically, print and submit. Use additional sheets if needed.
2. Filing fee: \$130.00. Make check payable to Madison or Pierce County Treasurer depending on application location.
3. Contact Madison or Pierce County Planning and Zoning Department if you have any questions.
4. Submit a list of property owners within 1,000 feet for Madison and 300 feet for Pierce and Madison County cities, **must be prepared by a certified abstractor**.

Name\_\_\_\_\_

Address\_\_\_\_\_ City\_\_\_\_\_ State\_\_\_\_\_

ZIP\_\_\_\_\_ Home Phone\_\_\_\_\_ Work Phone \_\_\_\_\_

Present Use of Subject Property\_\_\_\_\_

Pursuant to the Pierce or Madison County Zoning Regulations, application is hereby made for the following proposed use of property or structure: \_\_\_\_\_

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Directional Part \_\_\_\_\_ Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ Lot No. \_\_\_\_\_

Area of Subject Property, Square Feet and/or Acres \_\_\_\_\_

How is the adjoining properties actually used? (example: farm, livestock, residential, grass, etc.)

North \_\_\_\_\_ South \_\_\_\_\_

East \_\_\_\_\_ West \_\_\_\_\_

How many years for this permit? \_ 5yrs \_ 10yrs \_ 15yrs \_ 20yrs \_ permanent \_ Other \_\_\_\_\_

Is a survey required for this use? \_\_\_ Yes \_\_\_ No a) If yes is it completed? \_\_\_ Yes \_\_\_ No b) If not completed, expected date of completion? \_\_\_\_\_

Name of Survey\_\_\_\_\_

Will this use in all other respects conform to the applicable regulations of the district in which it is located? \_\_\_ Yes \_\_\_ No

Explain \_\_\_\_\_

Will this use conform to all other applicable regulations and laws of any governmental jurisdiction? \_\_\_ Yes \_\_\_ No

Explain \_\_\_\_\_

**MADISON COUNTY JOINT PLANNING AND ZONING DEPARTMENT**  
**Phone (402) 370-3577 Fax (402) 370-3581 1112 Bonita Dr. Norfolk, NE 68701**  
**PIERCE COUNTY PLANNING AND ZONING DEPARTMENT**  
**Phone (402) 329-4600 111 W Court Room 6 Pierce, NE 68767**

Will this use create a possible nuisance to neighbors? ☐ Yes ☐ No (example: noise, odors, traffic)

Explain \_\_\_\_\_

Will this use involve customers to be at the site? ☐ Occasionally ☐ Regularly ☐ Never

Will this use have adequate water, sewer, and drainage facilities (Approved by the local health department, Pierce/Madison Board of Commissioners or City Council, and the State of Nebraska Health and Human Services)? ☐ Yes ☐ No

Explain \_\_\_\_\_

Will ingress and egress be so designed as to minimize traffic congestion in the public streets/roads? ☐ Yes ☐ No

Explain \_\_\_\_\_

Will this use require a permit from a state or federal agency in order to operate? ☐ Yes ☐ No

Explain \_\_\_\_\_

Will this use hire new or additional employees? ☐ Yes ☐ No If yes how many? \_\_\_\_\_

Explain \_\_\_\_\_

Will this use require a new structure, building or facility to be built? ☐ Yes ☐ No

Explain \_\_\_\_\_

Estimated Cost of new structure, building or facility to be built \$ \_\_\_\_\_

Enclosed:

Site Plan ☐ Soil Suitability Map ☐ Easements ☐ Other \_\_\_\_\_

THE ZONING ADMINISTRATOR, WHO MAY BE ACCOMPANIED BY OTHERS, IS HEREBY AUTHORIZED TO ENTER UPON THE PROPERTY DURING NORMAL WORKING HOURS FOR THE PURPOSE OF BECOMING FAMILIAR THE PROPOSED SITUATION.

**Application Fee is Non-Refundable**

\_\_\_\_\_  
Signature of Owner or \_\_\_\_\_  
Signature of Agent

\_\_\_\_\_  
Date \_\_\_\_\_  
Date

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