



COMMUNITY PLANNING & DEVELOPMENT

CITY HALL ANNEX
520 MAIN STREET
BELTON, MISSOURI 64012

TELEPHONE * (816) 331-4331
FAX * (816) 331-6973

WEBSITE * www.belton.org

APPLICATION FOR SPECIAL USE PERMIT

FILING FEE: \$150.00

CASE NO.: _____

DATE FILED: _____

Name of Applicant: _____

Mailing Address: _____ Phone: _____

Email: _____

Name of Authorized Agent (if one): _____

Mailing Address: _____ Phone: _____

Email: _____

Relationship of applicant to property is that of _____
(Owner, Tenant, Lessee, Other)

Application is made for a use permitted on review as provided in Chapter _____ of the Unified Development Code, to permit the installation or construction of

On property located _____

And legally described as _____

And which is presently zoned _____ District.
(Attach additional sheets if necessary)

The applicant hereby declares that all information above is true to the best of his/her knowledge, that all conditions and standards set out in the Zoning Ordinance pertaining to this use have been or have been proposed to be met and that, along with this application, sketch maps, the property owner list and the appropriate review and filing fee have been submitted.

Applicant Signature

Authorized Agent Signature

Owner Authorization Signature