

CONDITIONAL USE APPLICATION

VILLAGE OF HOLLAND
1245 CLARION AVENUE
HOLLAND OH 43528

The undersigned requests a conditional use permit for the use(s) specified below. It is understood that if the application is approved it authorizes only the use described herein and any conditions or safeguards required by the Village of Holland. If the use is discontinued for a period of one year, this permit shall automatically expire.

NO ACTION WILL BE TAKEN ON ANY APPLICATION NOT SUBMITTED WITH THE APPLICATION FEE (\$100)

APPLICANT: _____

APPLICANT MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____ PHONE: _____

PROPERTY OWNER (if different from applicant) (authorization for applicant to act for the property owner will be required):

PROPERTY OWNER MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____ PHONE: _____

SUBDIVISION NAME: _____ LOT NUMBER: _____ TAX PARCEL # _____

Other description of property or legal description if not located within a subdivision:

Attach a plan for the proposed use, showing the location of the building, parking and loading areas, traffic access and circulation routes, utilities, signs and landscaping. A description of the site plan to explain the necessity of the conditional use and also the economic, noise, glare, and odor effects of the conditional use on adjoining properties and the general compatibility with adjacent and other properties within the district.

I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION AND ITS SUPPLEMENTS IS TRUE AND CORRECT.

SIGNATURE _____

DATE _____

Official Use Only – Village of Holland

Received by: _____ Date: _____ Plan Commission Review Date: _____

Plan Commission: Recommends Approval Recommends Denial Recommends Approval with Contingencies

Plan Commission Chair: _____ Date: _____

Date of Public Hearing: _____ Date of Newspaper Notice: _____

Date of Adjacent Owner Notification: _____

Official Use- Village of Holland Council/Clerk-Treasurer

Action by Legislative Authority: Date: _____ Approved: _____ Denied: _____ Amended: _____

Explanation of Legislative Authority Denial or Amended Actions: _____

Clerk-Treasurer: _____ Date: _____