

CITY OF NEW HAVEN

WWW.NEWHAVENMO.ORG
101 FRONT STREET
PO BOX 236
NEW HAVEN, MO 63068



PHONE 573-500-2530

INFO@NEWHAVENMO.ORG

FAX 573-237-4696

SPECIAL USE PERMIT APPLICATION

Please print or type

Applicant Information:

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Property Information for Use:

Property Address: _____

Property Tax ID # _____

Present Zoning Classification: _____ Legal Description: _____

Present Use: _____ Proposed Use: _____

Special Use Permit Process:

1. Submit application, proposed use, site plan, and fee (\$150). Site plan needs to include:
 - **Boundary of the subject property.**
 - **Adjacent or connecting streets and their names.**
 - **Building(s) outline and floor area.**
 - **Parking areas and parking calculations, if applicable.**
 - **Curb cuts and cross access with adjacent parcels, if applicable.**
 - **Site features including light standards, trash enclosures, fencing.**
 - **General location of landscaping.**
 - **Setback and appropriate yards.**
2. Public Hearing for proposed use will be published in local newspaper 15 days prior to Planning and Zoning meeting (4th Tuesday of the month). Application, site plan, proposed use details, and fee must be submitted by the **last day of the prior month** to meet these deadlines.
3. Recommendation is made by the Planning and Zoning Commission to the Board of Aldermen. The Board of Aldermen will meet on the 2nd Monday of the following month to approve or deny the special use permit application.
4. If a special use permit is issued, it will expire 180 day after approval if the use has not been put into place and/or a building permit has not been issued.

CITY OF NEW HAVEN

WWW.NEWHAVENMO.ORG

101 FRONT STREET

PO BOX 236

NEW HAVEN, MO 63068



PHONE 573-500-2530

INFO@NEWHAVENMO.ORG

FAX 573-237-4696

Description of Proposed Special Use

Keep in mind that the Planning and Zoning Commission and Board of Aldermen will consider evidence that pertain to the following aspects:

How will this use affect the character of the surrounding area (lighting, noise, aesthetic changes)?

How will this use affect the traffic conditions of the surrounding area?

How will this use affect the public services (police, utilities, and streets)?

How does this use align with the Comprehensive Plan?

Please note: The City reserves the right to require additional information if necessary for evaluation of the permit application

Please Sign and Date:

Applicant(s) Signature: _____ **Date:** _____