



TOWN OF SPRINGERVILLE

"GATEWAY TO THE WHITE MOUNTAINS"

APPLICATION FOR CONDITIONAL USE PERMIT

Name of Applicant(s)

Address of proposed site

Mailing Address

Parcel Number

Applicant Telephone Number(s)

Current Zoning Classification

Signature of Applicant(s)

Type of proposed business (*if possible, use name/type of business listed in the zoning code*)

Date

NOTE: The Springerville Planning and Zoning Commission normally meet 3:00 p.m. the second Wednesday of the month, but may; occasionally, change the meeting date. Deadline for applications is twenty (20) calendar days in advance of the meeting date. It is the responsibility of the applicant to verify the meeting date and submit a complete application by 4:00 p.m. on the deadline day.

Fee: \$ _____

Received By: _____

Date Stamp:

Approved: Y ____ N ____

Minutes Attached: _____

Confirmed By: _____

Date Stamp:

All documentation MUST be submitted before an application is complete

Equal Opportunity Employer / Program • Auxiliary aids and services are available upon request to individuals with disabilities • To request this document in alternative format or for further information about this policy, contact your local office; TTY/TDD Services: 7-1-1.