

RADCLIFF BOARD OF ADJUSTMENT
CONDITIONAL USE PERMIT APPLICATION
PUBLIC OR QUASI-PUBLIC USES IN THE
R-H, R-2, R-3, R-4, R-5, R-6 & P.U.D. ZONES



City of Radcliff Planning Department
411 West Lincoln Trail Blvd., P. O. Box 519
Radcliff, KY 40159-0519
270-351-1875

The following items are to be submitted along with this application:

- A scaled drawing of the property under consideration which indicates the proposed site layout and the architecture of the proposed building(s).
- A review fee of \$150.00, payable to the City of Radcliff, of which no part is refundable to the applicant.
- One copy of the deed(s) of the property.

Applicant(s) Name: _____

Address: _____

Phone Number: _____

Address of property under consideration: _____

Zone of property under consideration: _____

Specific type of land use for which the Conditional Use Permit is being requested:

PLEASE PROVIDE THE FOLLOWING INFORMATION:

1. List the streets to which the proposed use will have access: _____

2. Give the estimated number, type and frequency of the traffic which will be generated by the use: _____

3. Please describe why you feel the proposed use will not be out of character with the existing neighborhood: _____

When land is located within or abuts any residential zoning district, the Planning Department will notify all adjacent property owners by letter of all conditional use hearings before the Radcliff Board of Adjustment at least fourteen (14) days prior to the hearing date. If the land is located within or abuts any residential zoning district, please list the names and addresses of all adjacent property owners, including those across from any adjoining streets or railroad tracks. Information regarding the owners of adjacent property may be found in the files of the Office of the Hardin County Property Valuation Administrator. The P.V.A. Office is located at 14 Public Square, Suite 2, Elizabethtown, Kentucky.

LIST OF ADJACENT PROPERTY OWNERS

| NAME | MAILING ADDRESS | ADDRESS OF PROPERTY | P.V.A. MAP NUMBER |
|------|-----------------|---------------------|-------------------|
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(If additional space is needed, please use separate sheet)

I do hereby certify that, to the best of my knowledge, the information provided herein is both complete and accurate and I understand that any inaccuracies may be considered just cause for invalidation of this application and any action taken on this application.

Property Owner(s) Signature

Title

Date

FOR OFFICIAL USE ONLY

Received by: _____ Date of Filing: _____

Review Fee: _____ Date Received: _____ Receipt #: _____

Land Use Restriction Fee: _____ Date Received: _____ Receipt #: _____

Date of Action: _____ Action Taken: _____

Board Chair: _____

Note: This application form is based upon Article X, Section 10.4 of the Radcliff Zoning Ordinance and General Development Regulations.