VILLAGE OF CLAYTON ZONING AND LAND USE

APPLICATION FORM, APPROVAL RECORD AND PERMIT

ZONING PERMIT
CONDITIONAL USE PERMIT
ZONING AMENDMENT
APPEAL OF ADMINISTRATIVE DECISION
VARIANCE
LAND DIVISION
PLANNED UNIT DEVELOPMENT
SIGN
MOBILE HOME PARK
RENTAL HOUSING

FENCE							
PERMIT NUMBER			PROJECT NAME				
CHECK ALL THAT APPLY							
□ ZONING PERMIT □ FENCE □ SIGN				☐ RENTAL HOUSING PERMIT		MIT	□ SKETCH PLAN □ PRELIMINARY PLAT □ FINAL PLAT □ CSM
☐ ZONING AMENDMENT, TEXT						II.	□ PUD:
☐ ZONING AMENDMENT, MAP	□А	DMINISTRATIV	E APPEAL	□ VARI.	ANCE		OTHER:
LOCATION(S) - STREET ADDRI	ESS(ES)					COUNTY	PIN - TAX PARCEL NUMBER
SUBDIVISION OR PLANNED U	NIT DEVE	ELOPMENT NAM	МЕ		ZONING DISTRIC	CT	
LOT(S)	OCK(S)		SECTION(S)		TOWNSHIP(S)		RANGE(S)
			APPLIC	ANTS			
APPLICANT/PROPERTY OWNE	R				STREET ADDRE	ESS	
CITY	ГАТЕ		ZIP CODE		PHONE		EMAIL
AGENT/CONSULTANT					STREET ADDRE	ESS	
CITY	ГАТЕ		ZIP CODE		PHONE		EMAIL
ZONING AND LAND USE PERM NEW CONSTRUCTION OR DEPROPOSED USE ESTIMATED COST	_	_	TING STRUCTUR	E -			
DESCRIPTION OF PROJECT O							
ADDITIONAL SPACE ON BACK			CERTIFIC				
knowledge and consent of those the Village of Clayton must be su understand that additional fees o understand that road and park de involved with this application or the consent.	persons was persons was persons with the person was personal to the persons with the persons was persons with the persons was persons with the persons with the persons was personal to the persons was personal to the persons with the persons with the persons was personal to the persons with the persons with the persons was personal to the persons with the persons was personal to the persons with the persons with the persons was personal to the persons with the persons wi	who are owners or rior to having this s may be required may be required	of subject property is matter processed and as the result of a d as a condition of	or are pd. I undeconsidera	arties to this applica erstand that public he ations, which may ar I. I understand that	tion. I unde earings or r ise in the p I am conse	rocessing of this docket. I nting to allow Village of Clayton staff , without obtaining any prior
SIGNATURE X							DATE
SIGNATURE X							DATE

PLEASE NOTE
REFER TO THE REGULATIONS FOR COMPLETE REQUIREMENTS
PLEASE SEE THE BACK
FEES
Fees are as established annually by the Village of Clayton Board and published in the official fee schedule.
Building Permit Issued Dated:
ADMINISTRATIVE APPROVALS With a permit designated, dated and signed below, a copy of this document constitutes said permit.

Building Permit Issued Dated:		
ADMINISTRATIVE APPROVALS With a p	permit designated, dated ar	nd signed below, a copy of this document constitutes said permit.
Permit type	_ Dated:	Authorized Signature:
Permit type	_ Dated:	Authorized Signature:
Permit type	_ Dated:	Authorized Signature:
Permit type	_ Dated:	Authorized Signature:
INSPECTION DATES AND RESULTS	Includes any inspection	to determine permit compliance with pertinent ordinances.
COVERNMENTAL APPROVALS (if no	······································	forms of the final selection OTAFF NOTFO below on attack as an
GOVERNMENTAL APPROVALS (if req	•	formation include in STAFF NOTES below or attach page.
Plan Commission Recommendation	Dated:	Village of Clayton Approval Dated:
Board of Appeals Decision		Dated:
SITE PLAN		

All Zoning Permits must be accompanied with a site development plan as follows:

- 1. The length and width of the lot
- 2. The length and width of all existing structures
- 3. The length and width of all proposed structures
- 4. The distance from front, rear and side lot lines5. The height in feet of proposed structure
- 6. All streets and easements
- 7. Driveways and parking spaces
- 8. Public utilities
- 9. The ordinary high water level
- 10. All floodway and floodway boundaries

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LAND DIVISION SKETCH PLAN All preliminary plats and certified survey maps applications metabolivision together with a location map showing the relation existing community facilities and consultation with the Village Zoning Administrator.	ship of the proposed subdivision to traffic arteries and
DESCRIPTION OF PROJECT OR PERTINENT CIRCUMSTANCES: CONT	TD:
STAFF NOTES	SHADED AREAS FOR STAFF USE ONLY

PLEASE NOTE
REFER TO THE REGULATIONS FOR COMPLETE REQUIREMENTS
PLEASE SEE THE FRONT

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