

CITY OF ORTONVILLE
MINNESOTA
315 MADISON AVE.

Phone: 320-839-3428

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REQUEST FOR SPECIAL USE PERMIT

- Applications for a Special Use Permit shall be made in writing to the Zoning Administrator.
- Upon receipt thereof, the Zoning Administrator shall refer the application to the Planning Commission for review and recommendation.
- The Planning Commission shall hold at least one (1) public hearing on the application for a Special Use Permit for any of the uses listed in the Zoning Ordinance.
- Recommendations of the Planning Commission shall be reported to the City Council within sixty (60) days of receipt of said application by the Planning Commissioner.
- No Special Use Permit shall be recommended by the Planning Commission unless the Planning Commission shall find that the use for which the permit is sought:
 1. Will not be detrimental to the health, safety or welfare of persons residing in the neighborhood of such use, and
 2. Will not be injurious to other property or improvements in the neighborhood.
- Upon receipt of the Planning Commission report, the City Council shall act thereon at a regular or special meeting. In granting a Special Use Permit, the Council may attach such terms and conditions as it may deem necessary.
- Special Use Permits may be granted by the City Council for any of the following purposes:
 - To permit any of the uses for which a Special Use Permit is required pursuant to the provisions of the Zoning Ordinance.
 - To permit the excavation of sand, gravel and other related materials from the soil in any district on a temporary or commercial basis, subject to such reasonable conditions as the City Council may provide.
- Any use permitted by a Special Use Permit shall be established and conducted in accordance with the terms thereof and with any regulations or restrictions attached thereto or described therein.

CITY OF ORTONVILLE

PLANNING & ZONING COMMISSION

APPLICATION FOR SPECIAL (CONDITIONAL) USE PERMIT

Street Location of Property: _____

Legal Description of Property: _____

Applicant: Name: _____

Address: _____

Phone: _____

Description of Request: _____

Reason for Request: _____

I hereby certify that all the data within my application is true and correct to the best of my knowledge.

Dated: _____

Signature of Applicant

FOR OFFICE USE ONLY -----

Applicable Ordinance No. _____ Section _____

Public Hearing Date: _____

APPROVED DENIED DATE

Planning Commission _____

City Council _____