

SPECIAL USE PERMIT

Planning Office – 600 9th Street – Wheatland, Wyoming 82201
Office 307.322-2962 – Fax 307.322.2968



All applications must include the following:

- ❑ **Application:** Fill out the application form completely. *Incomplete applications will be returned.*
- ❑ **Fees:** All applicable fees. Check or Cash only, the planning office cannot process credit cards.
- ❑ **Site Plan:** Complete site plan
- ❑ **Project Plan:** Engineer and/or design drawings and information, if applicable.
- ❑ **Proof of Ownership:** Book and page number of the deed, copy of the deed, lease, or contract for purchase.
- ❑ **Letter of Justification:** Statement of purpose/intent.
- ❑ **Parking Plan:** Commercial, Industrial, and Multi-Family parcels are required to provide a parking plan, if applicable.

IMPORTANT NOTICES

- ❖ Special Use of Property applications must be heard at public hearings by both the Platte County Planning and Zoning Commission and Platte County Board of Commissioners.
- ❖ Special Use of Property applications must be approved by the Platte County Board of Commissioners **before** the use specified within the application can begin.
- ❖ The applicant agrees to abide by the Platte County Planning and Zoning Rules and Regulations, as well as any requirements and/or conditions specific to the property required by Platte County.
- ❖ Additional application requirements can vary depending on the zoning of the property.

SPECIAL USE OF PROPERTY

Applicant Name: _____ Phone No.: _____

Mailing Address: _____

E-mail Address: _____

If the applicant is other than the owner of the property for which this special use permit is being sought, the applicant must provide separate written approval from the owner, or the owner may indicate approval by signing below.

Owner Name: _____ Signature: _____

Mailing Address: _____

E-mail Address: _____ Phone No.: _____

Proof of Ownership: Deed Book _____ Page _____, Deed, Lease, Purchase Contract Attached

SUP-____-____

Physical address of property for which this special use permit is being requested:

Legal description of property for which this Special Use Permit is being requested:

Subdivision: _____ Tract/Lot(s): _____ Quarter Section: _____

Of Section: _____ Township _____ North, Range _____ West

Acreage: _____ Located within a floodplain: Yes No

Current Land Use: _____ Zoning Classification: _____

Proposed use of property. **for animals, include: type, number, and use of animals, (i.e.: pet, grazing, breeding, other; square footage of property; plot plan indicating location and size of all buildings, including animal shelter(s), fencing, and information relating to the type of shelter provided) **Other uses include: size of building(s), number of occupants and/or employees, hours of operation, and a site plan: _____

SITE PLAN REQUIREMENTS

- ❖ Show the entire lot or parcel with dimensions and orient the drawing with the North Arrow.
- ❖ Indicate adjacent roads and their names.
- ❖ Indicate locations and outside dimensions of all buildings.
- ❖ Setbacks are required for buildings and/or project structures. Indicate setbacks from property lines, easements, rights-of-way, and roads for all proposed structures and provide the distances.
- ❖ Setbacks are required for both the well and wastewater (septic) system. Indicate setbacks from property lines with distances to well and wastewater system.
- ❖ Indicate other significant features or improvements of the subject property, such as streams, ponds, irrigation ditches, pipelines, wells, floodplains, wastewater systems, corrals, fence/screening, towers, overhead power lines, etc.
- ❖ Commercial, Industrial, and Multi-Family parcels must identify landscaping and parking areas.
- ❖ Indicate the driveway location(s), off-street parking, and routes of ingress and egress.

APPLICATION SIGNATURE(S) AND ACCESS PERMISSION

Right to ingress property for assessment, evaluation, and inspections.

I, the undersigned, hereby grant authorized Platte County Personnel the right to enter onto this said land/property for all inspection, assessment, and/or evaluation purposes necessary to exercise this Special Use Permit. I certify, to the best of my knowledge, that all the information in this application is true and correct, and that I am the owner of the above-described property or have been authorized by the owner to make this application as his/her agent.

Signature of Applicant(s)

Date

PLANNING OFFICE USE ONLY

Date completed application received: _____ Application Fee Total: _____

Planning & Zoning Commission Public Hearing Date: _____ Approved Disapproval

Board of County Commissioners Public Hearing Date: _____ Approved Disapproval

This Special Use Permit request is granted with/ without conditions; this ____ day of _____, 2021.

County Commissioner Chairman

Special Use Permit Conditions: _____
