



Application No. (s): _____

**APPLICATION FOR A
SPECIAL USE PERMIT**

Date: _____

TO THE VILLAGE OF FLAT ROCK PLANNING BOARD:

I, _____ (owner/agent) hereby submit to the Planning Board for its review, and subsequently to the Village Council for its approval of a Special Use Permit, to be issued for:

Project Name: _____

Project Address: _____

The application includes the items required by the Village Zoning Ordinance, and is submitted at least 20 days prior to review by the Planning Board.

Fee Paid: _____ Receipt #: _____

Applicant: _____

Address: _____

E-mail Address: _____ Telephone #: _____

Zoning Administrator: _____ Date: _____

The applicant is responsible for satisfying all other county, state and federal requirements.