

City of Manchester  
 14318 Manchester Road  
 Manchester, MO 63011  
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 pandz@manchestermo.gov



## Special Use Permit Application

**PROJECT ADDRESS:** \_\_\_\_\_  
 Owner: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_ Email: \_\_\_\_\_

**Applicant:** \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_ Email: \_\_\_\_\_

**REQUIREMENTS:**  
 Every application submitted to the Planning and Zoning Commission for review and approval must contain the following:

- A non-refundable fee of \$300
- Two (2) copies for initial review and upon request twenty (24) final copies of:
  - A plot survey/sketch/site plan, to scale and showing lot/property in question.
  - A letter of intent describing the proposed use of the Special Use Permit. Description can include (but is not limited to) the nature of the business, hours of operation, number of employees, etc.
  - Information on the number of parking spaces assigned to the space.
  - Any other pertinent information for the Commission to review with your application.
- Completed application with name of applicant that will appear before the Commission and Board.

**An incomplete application may result in your case being postponed to another future Commission meeting.**

<b>Legal Description of Property:</b>	
<b>Proposed Special Use:</b>	
<b>Existing Zoning:</b>	

I hereby certify that the information contained in this application and accompanying documents are correct, and that I will conform to all applicable laws of the City of Manchester.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Applicant's Name Printed: \_\_\_\_\_

**FOR OFFICE USE ONLY BELOW**

**ZONING APPROVAL** City of Manchester Permit #: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
Director, Planning, Zoning and Economic Development

**Zoning Fees**      Fee paid on: \_\_\_\_\_      Amount: \_\_\_\_\_