

Office use only

Zone: _____ Sign Permit Conditional Use Permit
 Allowed Use Adequate Off-street Parking

Permit Fee _____ \$30.00 Commercial
 _____ \$15.00 Home Based

Receipt: _____

Date: _____

1. Name of Business: _____

2. Business Address: _____

3. Business Phone: _____

4. Mailing Address: _____

5. Owner: _____

6. Owner Address: _____

7. Emergency Contact Name: _____ Phone: _____

8. Proposed use in detail:

9. Off-street Parking Provisions:

10. Total Square Feet - Building: _____ Lot: _____

11. Hazardous Materials Onsite:

Certificate of Approval

City Zoning Administrator or Designee

On this date _____, I recommend this application be Approved Disapproved subject to or by reason of the following:

***If approved** Property owner and/or business owner must abide by all City of Glenwood Land Ordinances.*

Zoning Administrator/Designee Date