Planning & Zoning Application

Application Number: _____

Date: _____

Parcel Number: _____ Legal Description: _____

Zoning District: _____

Property Owner:

Name: _____

Phone Number: _____

Address: _____
Street City State Zip Code

Email Address: _____

Applicant (or Co-Owner):

Name: _____

Phone Number: _____

Address: _____
Street City State Zip Code

Email Address: _____

Type of Request:

_____ Variance _____ Conditional Use _____ Special Use

Applicants should review the following ordinance sections for requirements before submitting:

- **Variances:** Article VIII, Section 8.3
- **Conditional Use Permits:** Article III, Section 3.6
- **Special Use Permits:** Article II, Section 2.3 (Definition #118) and Article III, Section 3.6

Existing Use:

_____

_____

Description of Request:

_____

_____

_____

_____

_____

Additional Requirements, if applicable:

1) **Site Plan & Physical Layout:**

   If applicable, please attach a scaled site plan showing:

   - Property boundaries
   - Existing and proposed buildings
   - Setbacks
   - Parking areas
   - Driveways & access points
   - Drainage patterns
   - Utilities (water, sewer, power)
   - Screening or buffering
   - Outdoor storage areas

2) **Impact Analysis:**

   Please describe the anticipated impact of the proposed use on each of the following (if applicable):

   - Traffic impact description
   - Noise, odor, lighting, or other environmental impacts
   - Compatibility statement describing how impacts will be minimized
   - Ingress/egress plan
   - Utility needs and adequacy
   - Drainage plan or description

3) **Neighbor Notification**

   Please provide the following:

   - List of all property owners within 300 feet of the affected property, as required for application review.
   - After the Public Hearing date is set, the City Auditor will provide you with the notice. Return it at least 10 days before the hearing with signatures from all listed property owners confirming they were notified.

Compliance & Fee Acknowledgment

I hereby certify that the information provided in this application, including all plans and supporting documents, is true and correct to the best of my knowledge. I acknowledge that the proposed request must comply with all applicable regulations of the zoning district in which it is located, as required by the City of Gladstone Zoning Ordinance.

I further acknowledge that I am responsible for all costs associated with the processing of this application, including but not limited to publication costs, attorney's fees, mileage, and copy expenses, as provided in Section 8.6 of the Gladstone Zoning Ordinance. I agree to pay such costs upon billing by the City of Gladstone.

Prop. Owner Signature: _____ Date: _____

Applicant (or Co-Owner) Signature: _____ Date: _____

Note: If the applicant is not the owner of the premises, the owner's signature — or separate written permission authorizing the applicant to sign on the owner's behalf — must be attached to this application. The signature of the applicant and the owner (or the owner's written permission) certifies that the owner grants permission for authorized City personnel to enter the premises for the purpose of reviewing this application.

For Office Use:

Planning & Zoning Public Hearing Date: _____ **Approval: YES or NO**

City Council Meeting Date: _____ **Approval: YES or NO**