



Special Use Permit

This 2-page form must be filled out completely
before your application will be accepted.

1. Property Address for the Special Use

2. Legal Description (attach if lengthy):

3. Project Name & Project Description

4. Applicant:

Address:

(Street) (City) (State) (Zip)

Telephone:

(Home) (Business) (Fax)

5. Property Owner:

Address:

(Street) (City) (State) (Zip)

Telephone:

(Home) (Business) (Fax)



6. Contact Person:_____

Address: _____
 (Street) (City) (State) (Zip)

Telephone:

(Home)	(Business)	(Fax)
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I (We) certify that I (we) am (are) familiar with applicable state and local codes and ordinances, the procedural requirements of the City of Nevada, and have submitted all the required information which is accurate and true.

Signed by: _____ (Applicant) _____ (Date)

NOTE: No other signature may be substituted for the Property Owner's Signature(s)

and: _____ (Property Owner) _____ (Date)

and: _____ (Contact Person) _____ (Date)