

City of Huron Community Development Department
36311 Lassen Avenue / P.O. Box 339, Huron, CA 93234
559-045-2241 (FAX) 559-945-2609

CONDITIONAL USE PERMIT APPLICATION

- reject raille	Application Nulliber (City to Complete)	Date
APPLICANT INFORMATION:		
Applicant/Property Owner:		
Mailing Address:		
Telephone Number:	Assessor Parcel Number:	
Property Location (Address):		
Legal Description (County Assessor Parcel No.; lot, block, Tract, etc.)	cel No.; lot, block, Tract, etc.)	
BBODEBTY HEE MEOBWATION.		
THE PROPERTY OF THE ORIGINATION.		
Current Zoning:	Existing Land Use	
Existing Number of Lots:	Area of Parcel in square feet:	
Proposed Use:		

PROPERTY USE INFORMATION:	
Current Zoning:	Existing Land Use
Existing Number of Lots:	Area of Parcel in square feet:
Proposed Use:	
(If additional space is required attach separate sheet of paper)	ate sheet of paper)
Describe any new structures or improvor of improvements, describe phasing if a landscaping, fences, signs, extension controls.	Describe any new structures or improvements associated with use (indicate total square footage of structures and type of improvements, describe phasing if any, describe any special features such as architectural, design, lighting, landscaping, fences, signs, extension of City or utility services or increase in service requirement, etc.).
(If additional space is required attach separate sheet of paper)	ate sheet of paper)

CITY OF HURON CONDITIONAL USE PERMIT APPLICATION — CONTINUED

Project Name_

Telephone Number	Telephone Number
Mailing Address	Mailing Address
Name of OWNER (Please Print)	Name of APPLICANT/AGENT (Please Print)
Signature of OWNER	Signature of APPLICANT/AGENT
The forgoing statements and answers herein contained and the information herewith submitted are in all respects true and correct to the best of my knowledge and belief.	The forgoing statements and answers herein contained and the in respects true and correct to the best of my knowledge and belief.
Signature of BOTH the APPLICANT and RECORDED PROPERTY OWNER(S) are required below as applicable.	Signature of BOTH the APPLICANT and RECOI applicable.
The undersigned applicant has the ability and intention to proceed with the actual construction work in accordance with these plans (as approved) within one year from the date of approval and the applicant understands the this conditional use permit, if granted, becomes null and void and of no effect if the applicant does not commence with the actual construction work in accordance with these plans with one year from the date of approval of this application and diligently proceed to completion. An extension to commence the work at a later date may be granted by the planning commission, upon the written petition of applicant for such extension before the expiration of the one-year period. The applicant understands that the Commission may also establish a deadline date for the completion of said project.	The undersigned applicant has the ability and intention to a (as approved) within one year from the date of approval a becomes null and void and of no effect if the applicant do these plans with one year from the date of approval of commence the work at a later date may be granted by the extension before the expiration of the one-year period. deadline date for the completion of said project.
al space is required attach separate sheet of paper) Application requires a Site Plan to be prepared. Attach Site Plan Application	(If additional space is required attach separate sheet of paper) Application requires a Site Plan to be
clients/service recipients per day; identify peak periods of activity during day, during week, or seasonally; vehicle traffic to and from use daily or during peak periods; parking requirements; describe noise, lighting, dust, odors from use and time of day of occurrences; etc.)	clients/service recipients per day; identify peak period to and from use daily or during peak periods; parking time of day of occurrences; etc.)
Describe operational characteristics of use (hours of operation; number of employees; anticipated number of	Describe operational characteristics of use (hours of