

# SPECIAL OR CONDITIONAL USE PERMIT APPLICATION

Grant County Planning & Zoning

PO Box 263

Carson, ND 58529

622-3311

FEE: To Be Determined\*

Payable to: Grant County Treasurer

[grantcountynd.com](http://grantcountynd.com)

Ordinances & Aerial Land View

## Grant County Zoning Ordinance 6.9.3 Penalties for Violations

Each violation of any regulation or restriction of this ordinance by any person shall constitute the maintenance of a public nuisance and shall, pursuant to the provisions of N.D.C.C. 11-33-21, be a class B misdemeanor. Each day that a violation occurs shall be considered a separate punishable offense.

1. NAME OF APPLICANT: \_\_\_\_\_

2. MAILING ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

3. TELEPHONE NUMBER: \_\_\_\_\_

4. CONTACT PERSON NAME/TITLE: \_\_\_\_\_  
\_\_\_\_\_

5. CONTACT PERSON TELEPHONE NUMBER/EMAIL: \_\_\_\_\_  
\_\_\_\_\_

6. PROPERTY IS LOCATED IN SECTION \_\_\_\_, TOWNSHIP \_\_\_\_\_, RANGE \_\_\_\_\_,  
QUARTER \_\_\_\_\_, AND CONTAINS \_\_\_\_ ACRES. (Attach map if multiple sections)

7. SPECIAL OR CONDITIONAL USE REQUESTED FOR: \_\_\_\_\_  
\_\_\_\_\_

8. PRESENT LAND USE: \_\_\_\_\_

9. PROPOSED LAND USE: \_\_\_\_\_

10. LANDOWNERS (attach additional page(s) as needed)	LEGAL DESCRIPTION
_____	_____
_____	_____
_____	_____

11. ADDITIONAL INFORMATION MAY BE NEEDED

- A. DESCRIPTION AND MAP OF THE SURROUNDING AREA
- B. PRELIMINARY MAP SHOWING LOCATION OF STRUCTURES TO BE DEVELOPED ON THE SITE AND DISTANCES BETWEEN STRUCTURES
- C. TOPOGRAPHICAL MAP OF SITE
- D. A TIMING SCHEDULE INDICATING ANTICIPATED START AND COMPLETION DATES OF THE SITE
- E. WRITTEN APPROVAL OF RESPECTIVE HIGHWAY AUTHORITY FOR NEW ACCESS ROADS AND/OR APPROACHES
- F. ANY ADDITIONAL INFORMATION THE PLANNING AND ZONING COMMISSION OR GRANT COUNTY COMMISSIONERS DEEMS NECESSARY

12. The Planning and Zoning Board requires that a representative be present at the planning and zoning meeting to answer questions and have information if needed. If someone is not present, the application will be tabled.

Start Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Applicant Signature

\*Determined Fee: Covers the costs of advertising, supplies and postage for Public Hearing  
(minimum fee \$250)

Zone Change -- If zone change is needed, an Application for Zone Change would be required, cost \$250

**THIS SECTION TO BE COMPLETED BY THE COUNTY PLANNING AND ZONING BOARD**

P & Z application date received \_\_\_\_\_ P & Z determined fee \_\_\_\_\_

Date permit fee paid \_\_\_\_\_ How paid – \_\_\_\_\_

Permit # \_\_\_\_\_

ACTION TAKEN       RECOMMENDED APPROVED       RECOMMENDED DENIED

RECOMMENDED CONDITIONS (IF ANY): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Chairman Planning and Zoning Signature

\_\_\_\_\_  
Date

**THIS SECTION TO BE COMPLETED BY THE COUNTY COMMISSION**

ACTION TAKEN       APPROVED       DENIED

CONDITIONS (IF ANY): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Chairman County Commissioners Signature

\_\_\_\_\_  
Date