

CITY OF TRENTON PLANNING BOARD

Form D- Application for Conditional Use Approval
(To be used in conjunction with the Application for Development Form A)

THIS PORTION TO BE COMPLETED BY DIVISION OF PLANNING STAFF ONLY

Date Filed _____ Application #: _____
Project Name: _____
Application Fees: _____
Escrow Deposit: _____
Date Paid: _____
Hearing Date _____

NOTE :
Two (2) copies of the completed applications along with ten (10) copies of other supporting documentation must be filed with the Division of Planning for professional review.

I. APPLICANT INFORMATION

Name: _____
Contact Person (if different): _____
Address: _____
Telephone: _____ Fax #: _____
Signature _____

II. PROPERTY INFORMATION

Property Address: _____
Block(s): _____ Lot(s): _____
Width: _____ Depth: _____
Area: _____

Existing Structures on the property: _____

Currently Zoned: _____

III. USES

Existing: _____
Permitted: _____
Proposed: _____

Application is hereby made for a Conditional Use permit under Article XXVII of the Zoning and Land Development Ordinance.

IV. PROPOSED DEVELOPMENT INFORMATION

Front Footage: _____ Stories: _____

Depth: _____ Height: _____

Setbacks:

Front: _____ Left Side Yard: _____

Rear: _____ Right Side Yard: _____

Gross Floor Area: _____ Building Coverage _____ sf _____ %

Lot Coverage _____ sf _____ %

V. FOR THE INTENDED CONDITIONAL USE, ALL PROVISIONS OF THE ZONING ORDINANCE, OTHER THAN USE, ARE COMPLIED WITH EXCEPT:

- 1. _____
- 2. _____
- 3. _____
- 4. _____

VI. HAS THERE BEEN ANY PREVIOUS APPEAL, REQUEST OR APPLICATION SUBMITTED TO THIS OR ANY OTHER CITY BOARD OR ZONING OFFICER INVOLVING THESE PREMISES?

___ Yes ___ No

If Yes,
State Date of Previous Request _____

Describe the nature of the application.

VII. SUPPLY A STATEMENT DESCRIBING THE GENERAL FITNESS OF THE STRUCTURE OR USE TO ITS PROPOSED LOCATION.

VIII. SUPPLY A STATEMENT ON PROVISIONS TO BE MADE FOR MINIMIZING THE EFFECTS OF THE CONDITIONAL USE UPON NEIGHBORING PROPERTIES AND

OTHER PROPERTIES IN THE ZONING DISTRICT. Include specific details illustrating adequate landscape buffering or distance from neighboring properties.

IX. SUPPLY A STATEMENT ON THE AMOUNT OF TRAFFIC ASSOCIATED WITH THE PROPOSED USES AND THE EFFORTS TO BE MADE TO MINIMIZE THE EFFECTS OF SUCH ADDITIONAL TRAFFIC UPON NEIGHBORING PROPERTIES AND OTHER PROPERTIES IN THE GENERAL AREA. Include specific details relating to periodic traffic volume, special traffic patterns and on-street parking.

X. PARKING

Existing Off-Street Parking Spaces Provided: _____

Off-Street Parking Spaces Required: _____

Off-Street Parking Spaces Proposed: _____

XI. CERTIFICATION

I certify that the foregoing statements and the materials submitted are true. I further certify that I am the individual applicant or that I am an Officer of the Corporate applicant and that I am authorized to sign the application for the Corporation or that I am general partner of the partnership applicant.

I further certify by signing this application that the relief requested can be granted without materially increasing traffic, fire, panic or other danger, nor be injurious to the public health, morals or the general welfare and will not substantially impair the intent and purpose of the Zoning Ordinance.

Sworn to and subscribed before me this _____ day of _____, 200__

Name of Applicant (Please Print)

Signature of Applicant

THIS FORM TO BE COMPLETED BY DIVISION OF PLANNING STAFF ONLY

RECOMMENDATION OF PLANNING DIVISION:

In granting this Conditional Use Application:

We have no objection

We object because of the following reasons:

We have no objection providing the attached conditions are imposed
(See enclosed letter)

ACTION OF TRENTON PLANNING BOARD:

Approved on _____ Vote: In favor Against Abstain

Disapproved on _____ Vote: In favor Against Abstain

Conditionally Approved on _____ Vote: In favor Against Abstain

Approved on _____

Date(s) of Hearing _____

Date Resolution Memorialized _____

Date Decision Published _____

Date of Notice to Applicant (within 10 days) _____

COMMENTS:
