

# Monroe County, Iowa Zoning Application

DATE: \_\_\_\_\_

APPLICATION FEE: \_\_\_\_\_

## NON-CONFORMING APPLICATION

APPLICANT NAME: \_\_\_\_\_

APPLICANT MAILING ADDRESS: \_\_\_\_\_

PROJECT 911 ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

LANDOWNER NAME: \_\_\_\_\_ RELATIONSHIP TO APPLICANT: \_\_\_\_\_

LANDOWNER MAILING ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

### PROJECT LOCATION LEGAL DESCRIPTION:

PROJECT LOCATION: Qtr: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_

ORIGINAL PARCEL SIZE (Acres/Sq Ft): \_\_\_\_\_

FRONT WIDTH: \_\_\_\_\_ REAR WIDTH: \_\_\_\_\_ LENGTH: \_\_\_\_\_

PARCEL # \_\_\_\_\_ CURRENTLY ZONED AS: \_\_\_\_\_

### SUMMARY OF REQUEST:

#### **REQUIRED DOCUMENTS:**

- Detailed aerial map of the property.
- If the applicant is not the landowner, a document that shows the applicant has the right to apply for this permit.
- Please submit a notarized, detailed, narrative stating the nature of the request, the type of non-conforming use to be maintained and/or continued.
- Please submit as many items of evidence as available which establishes when the non-conforming use was established and documents continuation or continuous presence since the date the use commenced. (i.e. notarized affidavits from neighbors, individuals, or businesses that you have done business with, utility bills, rental or other receipts, tax records, copies of old permits, copies of advertisements, etc.)
- Names & contact information for all business associates involved in the non-conforming use.
- Names & contact information for all regulatory agencies involved in the non-conforming use.
- Names & contact information for all suppliers of equipment & materials involved in the non-conforming business.
- Names, issuing agency, date of issue and expiration date of all required permits.

I certify that the above information is correct and that all proposed work will be completed in accordance with the Monroe County regulations.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Zoning Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Please complete the application & submit to the Zoning Director at the on the 1<sup>st</sup> floor of the Monroe County Courthouse. All applications will be reviewed by the Zoning Administrator and presented to the Zoning Commission Board, Zoning Board of Adjustments and/or County Board of Supervisors for official approval.*