



St. Charles Parish  
 Department of Planning & Zoning  
**SPECIAL PERMIT USE**

OFFICE USE	
Submittal Date	_____
Received By	_____
Receipt #	_____
Case #	_____

**APPLICANT INFORMATION**

Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**PROPERTY INFORMATION**

Municipal Address (if assigned): \_\_\_\_\_

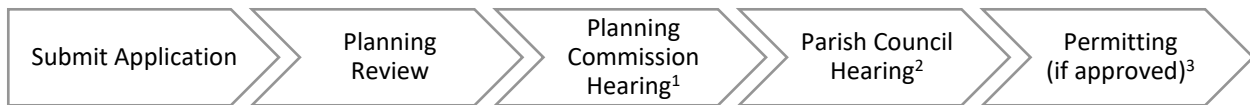
Lot, Block, Subdivision: \_\_\_\_\_

Proposed Use: \_\_\_\_\_

**APPLICATION CHECKLIST** (review process does not begin until all items below are submitted):

- \_\_\_\_ 1. Application with notarized endorsement of all property owners (see page bottom)  
 \*If the owner is a corporation, a corporate resolution authorizing the representative must be provided
- \_\_\_\_ 2. Act of Sale or Deed to the property (copies available at Clerk of Courts Office)
- \_\_\_\_ 3. Survey of property
- \_\_\_\_ 4. Site plan (drawn to scale and showing the proposed use meets all applicable requirements)
- \_\_\_\_ 5. Application Fee: \$50

**SPECIAL PERMIT USE PROCESS**



<sup>1</sup> The Planning Commission can either approve, approve with conditions, or deny the request.

<sup>2</sup> For applications requesting waivers and approved by the Planning Commission, AND/OR those uses requiring a supporting resolution as specified in the Zoning Ordinance.

<sup>3</sup> If approved, permitting must occur within one (1) year of the approval date.

**I/we swear to be the sole owner(s) of the property in this request and endorse this application.**

_____	_____
(Signature)	(Print)
_____	_____
(Signature)	(Print)
_____	_____
(Signature)	(Print)
_____	_____
(Notary signature & seal)	(Date)