



**APPLICATION FOR CONDITIONAL USE APPROVAL**  
**PLANNING DEPARTMENT**  
171 North Ross Street, Suite 100  
Auburn, AL 36830  
(334) 501-3040 ~ Fax: (334) 501-7293

Applicant Name: _____	Project Name: _____
Mailing Address: _____	Site Address: _____
_____	Phone Number: _____
Email Address: _____	Fax Number: _____

**A COPY OF THE DEED TO THE SUBJECT PROPERTY MUST BE SUBMITTED WITH THIS APPLICATION. If the applicant is not the owner, then a letter allowing the applicant to act as an "authorized agent" must be on file. THREE FULL-SIZE PAPER COPIES AND ONE 11X17 REDUCTION MUST ALSO ACCOMPANY THE APPLICATION. ELECTRONIC DOCUMENTS ARE PREFERRED.**

**The Planning Department will submit on the applicant's behalf a legal advertisement to The Auburn Villager for this application. All associated fees will be charged to the applicant unless otherwise arranged. This advertisement must be paid in advance of publication, or the case will not be heard by the Planning Commission.**

**Required Documents Attached:**

- Engineering Certification
- Deed
- Authorization to Act as Applicant
- 3 full-size copies
- 11x17 Reduction

General Location: \_\_\_\_\_

Gross Area of Subject Property: \_\_\_\_\_ Number of Individual Units: \_\_\_\_\_

Current Use: \_\_\_\_\_ Current Zoning District: \_\_\_\_\_

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

Is the proposed development to be on an existing lot of record?  Yes  No

Is the proposed development on a designated corridor?  Yes  No

Proposed Cladding/Façade Material: \_\_\_\_\_ (Corridor Only, §513)

Is site plan approval contingent on any other official action by the City?  Yes  No If yes, please specify:

- Annexation
- Subdivision plat approval
- Rezoning
- Other: \_\_\_\_\_

**I, the applicant, certify that all of the above facts are true and correct to the best of my knowledge. I understand that any development approval(s) granted pursuant to this application shall be subject to all applicable regulations of the City of Auburn, and that such approval(s) shall expire unless construction has commenced within eighteen (18) months following date of approval. I further understand that this submission will be verified by Planning Department staff for completeness within two business days in accordance with the City's regulations. An application that is deemed incomplete could result in the application not being considered at the next meeting. If this is the case, then I will be notified by telephone accordingly by the staff within two business days.**

Applicant's Signature: _____	Date: _____
Applicant's Name (Please print): _____	

Received By: \_\_\_\_\_ Date: \_\_\_\_\_