TOWN OF SARATOGA
APPLICATION FOR SPECIAL USE PERMIT

Date of Application:_____ Zone:_____ Fee:_$25.00_

Applicant:_____ Telephone Number:_____
Address: _____ City & State:_____
Address of Property:_____
Legal Description of Property:_____

-----INTENDED USE-----

_____
_____
_____
_____

Return Form By:_____ Signature of Applicant:_____
_____

Case Record Number:_____ Petition Requirements Met:_____ Yes _____No
Date Received:_____
Date Set For Planning Commission Hearing:_____
Date of Legal Notice:_____ Published In:
Saratoga Sun:_____
Rawlins Daily Times_____
(Date of Legal Notice must be published five (5)
Days prior to Planning Commission meeting)

Photograph Taken:_____ Yes _____No

ACTION:
Saratoga Planning Commission Decision: APPROVAL:_____
DISAPPROVAL:_____

By:_____
Zoning Officer

Form2012Dec