

City of Kindred Planning and Zoning Permit Application

Procedures and submission requirements can be found in the Kindred Land Development Code (Kindred City Ordinance Chapter IV). Application and fees must be submitted as soon as possible in order to allow sufficient time for publication of required public hearing notices. Applications will be reviewed within 7-10 business days. Please allow 4-8 weeks for full processing and review before boards depending on type of permit request and publishing requirements. Public hearing(s) will not be scheduled/noticed until all supporting documents and application fees are received. The Planning and Zoning Commission meets the third Monday of the month at 6:30pm.

Applicant Name: _____ **Phone:** _____

Applicant Address _____ **Email:** _____

City, State, Zip _____ **Additional Phone/email:** _____

**If the applicant is not the same as the owner, the owner should sign the application and/or submit a letter authorizing the applicant to proceed on behalf of the owner.*

Owner Name: _____ **Phone:** _____

Owner Address _____ **Email:** _____

City, State, Zip _____ **Additional Phone/email:** _____

Parcel Number & Legal Description of Property (attach additional sheet if necessary)

Briefly describe the reason for request

A copy of relevant Kindred City Ordinances was reviewed by the applicant via: (circle one) EMAIL IN PERSON MAIL WEBSITE

Applicant Signature: _____ **Date:** _____

Please check all fees that apply and submit payment with application. Application may be utilized for more than one request or applicant may copy and attach a separate application for each item as needed. Application fee is non-refundable, unless ordinance indicates otherwise.

Zoning Request = \$750.00 Preliminary Plat = \$1,000.00 Final Plat = \$1,000.00

Variance = \$500.00 Conditional Use Permit = \$300.00

Lot Split = \$150.00 (Applicant and/or property owner must provide the City with the proposed legal description of the split or a site survey. (A plat may be required depending on land to be split.)

CITY OF KINDRED OFFICE USE ONLY:

Total Application Fee: _____ Received Date: _____ Payment Type #: _____ Receipt #: _____

Type and Date supporting documents received: _____

Present Zoning Classification: _____ Existing Land Use: _____

Board	Request	Meeting Date	Publication Dates	Board Decision
P&Z				
City Council				
P&Z				
City Council				
City Council				