



City of Streator
 204 South Bloomington Street
 Streator, Illinois 61364
 Phone: (815) 672-2517
 Fax: (815) 672-7566

Permit #: _____

SPECIAL USE PERMIT APPLICATION

Applicant Name: _____ Primary Phone #: _____

Mailing Address: _____ City/State/Zip: _____

Applicant's Representative: _____ Primary Phone #: _____

Mailing Address: _____ City/State/Zip: _____

1. Application fee is \$300.00 unless submitted at the same time as a zoning or rezoning request. In that case, the combined fee for both applications is \$400.00. Applicant will be required to reimburse the City of any cost of legal notices.

2. The Applicant petitions the City of Streator for a special use permit for the following property:

a. Legal Description (attach the full legal description on 8 ½ x 11 separate sheet of paper—type written, plus an electronic version of the legal description).

Subdivision Name: _____ Property Tax ID #: _____

b. Street Address or Common Location: _____

c. Describe Reason for request: _____

d. Describe the proposed use; characteristics such as operating hours, number of employees, capacity of facility, etc.: _____

e. Size of Lot (sq. ft.): _____

f. Existing Zoning District: _____

g. Is the property located in a flood plain or flood way? Yes No

h. Is the proposed use in conformance with the city's Comprehensive Plan? Yes No

i. How will the proposed use impact existing and future land uses: _____

j. How will proposed use impact adjacent property values: _____

l. Will the property negatively impact the general public health, safety and welfare: Yes No
 If yes, please explain: _____

- m. Will the change conflict with existing conditions or public improvements such as schools, sewer/water system, parks, roads, traffic patterns, etc.: Yes No

If yes, please explain: _____

3. The Applicant(s) have read and completed all of the above information and affirm that it is true and correct.

Applicant's Signature: _____ Date: _____

Applicant's Signature: _____ Date: _____

Subscribed and sworn to before me this _____ day of _____, 20____

(Seal)

Notary Public

4. I hereby affirm that I am the legal owner (or authorized agent or representative-proof attached) of the subject property and authorize the petitioner to pursue this petition as described above.

Owner's Signature: _____ Date: _____

Owner's Signature: _____ Date: _____

Subscribed and sworn to before me this _____ day of _____, 20____

(Seal)

Notary Public