

## Special Use Permit Application

Housing & Community Development Department - 24 N. Center Street, Marshalltown, IA 50158  
Ph: 641-754-5756 - Fax: 641-754-5742 - E-mail: [hhernandez@marshalltown-ia.gov](mailto:hhernandez@marshalltown-ia.gov)

All applicable items listed must be submitted with this application:

\_\_\_\_\_ **Project Description.** Include a cover letter or project description summarizing the proposed project.

\_\_\_\_\_ **A site plan, drawn in ink to scale.** This site plan shall not be larger than 11" X 17."

\_\_\_\_\_ **Any other applicable drawings or diagrams.** This may include site improvements, design features, public services, and compatibility.

\_\_\_\_\_ **Application fee.** A \$300 fee is required for a special use request. Make check payable to "City of Marshalltown." The fee must be paid when the application is submitted.

\_\_\_\_\_ **Full legal description of the property.** *Please note that the tax description on the Marshall County assessor's webpage is NOT the full legal description.* The legal description is listed on the property's abstract and/or a recorded deed or may be obtained from the Marshall County Recorder's Office for a fee.

\_\_\_\_\_ **Owner's consent to apply (if applicable).** If the applicant is NOT the current title owner, a letter from the title owner shall be included indicating consent to apply.

It is the burden of the applicant to provide sufficient facts with this application and at the Board of Adjustment meeting to support a finding that all the standards for approval have been met.

For all special use requests, the Plan & Zoning Commission shall first review the proposal, hold a public hearing and make a recommendation to the Board of Adjustment which will also hold a public hearing prior to acting. A public hearing notice will be published and a sign will be posted on site for public information.

**Attendance at all meetings is required.**

**Please type or print legibly in ink.**

Property Address:	
Owner:	
Mailing Address:	
Phone:	Email Address:
Agent Name (if applicable):	
Owner's Agent Address:	
Agent Phone:	Agent Email Address:

Answer the following questions as part of the application. Responses may be provided as a separate document.

1. **Surrounding Properties.** How will this special use permit impact the surrounding properties? How will the proposed special use operate or be designed in a manner that does not diminish the use or functionality of surrounding properties? You may include supporting evidence from a professional appraiser, real estate professional, or other professional. *Additional review criteria:* The board shall consider if approval creates an unwanted concentration of similar special uses.
  
2. **Hours of Operation and Site Improvements.** Please state the following: Provisions for hours of operation, parking and loading areas, driveways, lighting, signs, landscaping, buffering, and other site improvements.
  
3. **Public Services Available.** Please state if adequate public services are available without disruption to existing uses (such as: streets, off-street parking, pedestrian facilities, water, sewer, gas, electricity, police and fire protection).
  
4. **Nuisance.** Is there any existing or potential of a nuisance if the special use permit is granted? (If, in the opinion of Plan and Zoning Commission or Board of Adjustment, the special use becomes a nuisance, the Special Use Permit may be recalled for further review, which could lead to the need for additional conditions, restrictions, or the revocation of the permit.)
  
5. **Design Features.** Please describe how design features will be incorporated to sufficiently protect adjacent uses. Address areas such as: service areas, pedestrian and vehicular circulation, safety provisions, access ways to and from the site, buffering, fencing, and building placement;
  
6. **Compatibility.** Will the proposed use be compatible with adjacent existing uses? (Compatibility shall be expressed in terms of appearance, architectural scale and features, site design and scope, landscaping, as well as the control of adverse environmental impacts, including noise and lighting, or other undesirable conditions.)
  
7. **Location.** Identify any other practicable alternative locations considered where a Special use would not be required

The board will use this information provided as part of the application in addition to information presented at the public meetings to review your request. Please attach any additional supporting information to be considered that has not previously been discussed. If you have any questions, please contact the Zoning Department at 641-754-5756 or [hhernandez@marshalltown-ia.gov](mailto:hhernandez@marshalltown-ia.gov) Meeting schedules will be set by the City Planner and agendas are posted to the City website: <https://www.marshalltown-ia.gov/AgendaCenter>

Owner/Agent Signature: \_\_\_\_\_

Date: \_\_\_\_\_