

**APPLICATION FOR CONDITIONAL USE  
Dodge County, Nebraska**

Date \_\_\_\_\_  
Property Owner's Name \_\_\_\_\_

Address: \_\_\_\_\_

Phone No. \_\_\_\_\_ (Home) \_\_\_\_\_ (Work)

Pursuant to the Dodge County Zoning Regulations, application is hereby made for the following proposed use of property or structure: \_\_\_\_\_

\_\_\_\_\_

Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ Lot No. \_\_\_\_\_

Location within Section \_\_\_\_\_ Lot Size \_\_\_\_\_ (Sq.Ft./Acres)

Estimated Cost of Structure/Use \$ \_\_\_\_\_ Zoning District \_\_\_\_\_

Will use in all other respects conform to the applicable regulations of the district in which it is located?

\_\_\_\_\_

Will use conform to all other applicable regulations and laws of any governmental jurisdiction? \_\_\_\_\_

How are Adjoining Properties Used (Actual Use)

North \_\_\_\_\_ South \_\_\_\_\_

East \_\_\_\_\_ West \_\_\_\_\_

**Justification**

You must justify your request. Questions 1 through 4 must be answered completely.

1. What is the general character of the area? Describe.
  
2. Can soil conditions support the proposed development? What is the soil classification of the area?
  
3. Will use have adequate water, sewer and drainage facilities (approved by the Dodge County Board of Health, Dodge County Board of Supervisors, and the State of Nebraska Department of Health)? \_\_\_\_\_

4. Will ingress and egress be so designed as to minimize traffic congestion in the public streets/roads?  
\_\_\_\_\_ How will the proposed Zoning District affect traffic in the area? Will streets or roads need to be updated for access to the area? If yes, what will the requirements be?

**Enclosed:**

Site Plan \_\_\_\_\_ Soil Suitably Map \_\_\_\_\_ Easements \_\_\_\_\_  
Conditions and requirements pending approval of application for a proposed operation and waste disposal plan from the DEQ or other applicable State Agency \_\_\_\_\_

If Exhibits are furnished, please describe and enumerate. (Furnish Plot or Site Plan showing existing and proposed structures, easements, water courses, curb cutbacks, etc.)

Application Fee of \$ \_\_\_\_\_ is Non-Refundable.

The Zoning Administrator or Building Inspector, who may be accompanied by others, is hereby authorized to enter upon the property during normal working hours for the purpose of becoming familiar with the proposed situation.

In consideration of the issuance of this Certificate, the applicant hereby certifies that the information in this application is true and correct, and hereby certifies that compliance with the zoning, subdivision and floodplain regulations which are in effect have been met.

Applicant's Signature \_\_\_\_\_ Mailing Address \_\_\_\_\_  
\_\_\_\_\_

**OFFICE USE ONLY**

PERMIT NO. \_\_\_\_\_

Permit when issued is Transferrable/Transferrable Upon Renewal

Date \_\_\_\_\_ Approved \_\_\_\_\_  
Approved with Added Conditions \_\_\_\_\_  
Disapproved \_\_\_\_\_ Chair, Dodge County Planning Comm

Date \_\_\_\_\_ Approved \_\_\_\_\_  
Approved with Added Conditions \_\_\_\_\_  
Disapproved \_\_\_\_\_ Chair, Dodge County Board of Comm

\_\_\_\_\_ See attachment for added conditions.

ATTEST \_\_\_\_\_  
Dodge County Clerk

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_