REQUEST FOR CONDITIONAL USE PERMIT
Town of Mars Hill
Mars Hill, North Carolina 28754

Name & Address of Agent (if any):

Location of Property:

Tax Map Reference: ______________ Zoning Classification: ______________

Conditional Use Proposed:

(Signature of Applicant) (Date)

Comments:

Planning & Zoning Board Action:

(Signature of Chairman, P&Z Board) (Date)

Names of all property owners and existing land uses within 200 feet of above subject property attached. (Must be provided by applicant for Conditional Use Permit.)

Application Received: ______________ Review Fee Paid: ______________