___ Minnehaha
___ Sioux Falls joint
___ Dell Rapids joint

CONDITIONAL USE PERMIT APPLICATION

Minnehaha County
Office of Planning and Zoning
Courthouse - 415 N Dakota Ave
Sioux Falls, SD 57104

Petition No.: _____
Date: _____
Filing Fee: _____
Receipt No.: _____

I/We, the undersigned, do hereby petition for approval of a conditional use permit on the following described property and authorize representatives of Minnehaha County to enter the property for inspection purposes.

Legal Description: _____

_____

Address or General Location _____

Existing Zoning District _____

Purpose _____

_____

Petitioner (Print): _____

Signature: _____

Date: _____ Phone: _____

Address: _____

_____

City *State* *Zip*

Owner (Print): _____

If different than above

Signature: _____

Date: _____ Phone: _____

Address: _____

_____

City *State* *Zip*