



Date Received: _____

Conditional Use Permit

City of Baton Rouge / Parish of East Baton Rouge
Office of the Planning Commission, 1100 Laurel Street, Suite 104
Baton Rouge, Louisiana 70802

Staff Use Only

Fee(s): _____ Application Taken by: _____
Case Number: _____ Meeting Date: _____
MPN Project Number: _____

Please Print or Type (all entities listed below will be copied on all comments)

1. Applicant Name and Title: _____
 Email Address: _____ Daytime Telephone: _____
 Address: _____ City: _____ State: _____ ZIP: _____
 Business: _____
2. Developer (if applicable): _____
 Email Address: _____
3. Name of Property Owner: _____
 Email Address: _____ Daytime Telephone: _____
 Address: _____ City: _____ State: _____ ZIP: _____
4. Subject Property Information:
 CPPC Lot ID#(s): _____
 Lot #(s): _____ Block/Square: _____
 Subdivision or Tract Name: _____
 (If property is not subdivided, attach a complete legal description and a survey map indicating bearings and dimensions.)
 Nearest Intersection: _____
5. Property Street Address: _____
6. Have any conditional use permits been granted for this location: Yes No
 If yes, state conditional use and the date of approval:

7. Action Requested: Major Minor Conditional Use Adjustment
8. Existing Zoning District: _____

9. Does the Conditional Use Application/Adjustment require rezoning: Yes No
 If yes, an application for rezoning to the appropriate zoning district must be filed concurrently with this application.
10. Specific proposed Conditional Use: _____
11. Justification for action requested: _____

12. Previous applications:
 Has any application been submitted to the Planning Commission concerning any part of the subject property within the past two years: Yes No
 If yes, provide the details and the final decision: _____

13. Stormwater Management Plan (SMP):
 Submitted Not Submitted (If not submitted, explain) _____

14. Drainage Impact Study (DIS):
 Submitted Not Submitted (If not submitted, explain) _____

15. Water Quality Impact Study (WQIS):
 Submitted Not Submitted (If not submitted, explain) _____

16. Attach a copy of the proposed conditional use site plan (see checklist requirements)
17. Describe impact on infrastructure (streets, drainage, sewer): _____

18. Impact of Public Facilities
 Describe the impact on Public Services such as schools, parks, transportation and other public facilities: _____

19. Effects on Adjacent Properties:
 Describe any proposed mitigation and/or reduction of adverse effects, including visual impacts of the proposed use on adjacent properties: _____

20. Compliance with Development Review Committee and/or Departments of Development and Transportation and Drainage comments will be required prior to approval:
 Acknowledgment

21. Acknowledgement:

I acknowledge that private deed restrictions or covenants may exist on the subject property. I recognize that neither the Planning Commission nor its staff may consider such deed restrictions or covenants, if any, when determining approval or denial of an application, nor can the City or Parish enforce private deed restrictions or covenants. It is my responsibility as an Applicant to determine if any such deed restrictions and covenants exist on the subject property, and to be aware that violations of the same subject me and/or Property Owner to litigation from others.

I acknowledge that the Planning Commission makes the final decision on the approval or denial of this application. I also recognize I do not have a right to an approval, regardless of staff certification that the application meets ordinance requirements. A Public Hearing is required to be held and the Planning Commission will make the decision based upon all evidence presented at the meeting.

I understand that the application fee is nonrefundable. (Applications must be received by 10:00a.m. on the scheduled Application Deadline.)

I understand that construction shall commence within one year of the approval date. Failure to commence construction within that period shall automatically render the Conditional Use Permit null and void. A permit for a Conditional Use authorizes only the particular use for which it was issued and such permit shall automatically expire and cease to be of any force or effect if such use shall, for any reason, be discontinued for a period of one year.

Application must be signed by both applicant and property owner if different. Letter of authorization must be submitted in absence of the property owner’s signature or where an authorized agent signs in lieu of either property owner or applicant.

Signature of Applicant	Type or Print Name of Applicant	Date
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Signature of Property Owner	Type or Print Name of Property Owner	Date
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Note: The Conditional Use Permit fee is determined according to the fee schedule. A rezoning application and fee may be required in addition to this application. Refer to Chapter 8 of the Unified Development Code for complete requirements and procedures relating to Conditional Use Permits.

Staff Use Only

- A. Land Use Classification(s): _____
- B. Zoning Classification(s): _____
- C. Existing Land Use(s): _____
- D. Surrounding Land Use(s): _____
- E. Surrounding Land Use Classification(s): _____
- F. Surrounding Zoning Classification(s): _____
- G. Proposed Conditional Use: _____
- H. Comprehensive Land Use Plan: Consistent Not Consistent
- I. Census Tract: _____
- J. Lot and Block: _____
- K. Council District: 1 2 3 4 5 6 7 8 9 10 11 12
- L. Is subject property located on **MoveBR**? If so, contact as needed.
 No Yes – date correspondence sent: _____
- M. Is subject property within Zone of Influence (Zachary, Central, BREC, or Health District)? If so, contact as needed.
 No Yes – date correspondence sent: _____
- N. Comments: _____

- N. _____
Planning Director or Authorized Signature Date