

APPLICATION FOR A SMALL RURAL BUSINESS PERMIT IN WHITESIDE COUNTY				FOR OFFICE USE ONLY
Flood Zone _____	Floodway _____	Rezoning Required Yes _____ No _____ Zoning Class Required _____	P.I.N.: _____ - _____ - _____	
Other Approval Required		Appl. Date	Date Appr.	
State Joint Permit			Application No.:	
Elevation Certificate			Issue Date :	
Storm-water Management Plan			Township :	
Notification Date: _____ Time: _____		Fire Dist.: _____	Census: / _____	Zoning Class. :
				Fee Paid : _____

I. APPLICANT INFORMATION

If the applicant is an organization, corporation, partnership or other association of individuals, please list the names and post office addresses of any affiliate of the applicant on the back of this form.

A. Applicant: _____

Date: _____

Address : _____

Signature: _____

If the applicant will not be the operator of the temporary use, please list the names and post office addresses of the individual, organization, corporation, partnership or other association of individuals, who or which will be the operator, using the back of this form if necessary.

B. Operator: _____

Address : _____

C. Has the applicant or operator ever:

1. received a Small Rural Business permit in Whiteside County?

Yes _____ No _____ Date received _____

2. been denied a Small Rural Business permit in Whiteside County?

Yes _____ No _____ Date received _____

II. PROPERTY INFORMATION

- A. Legal description: Please attach a copy of the recorded deed to the property for which the special use is being requested. Also, list the names of any other persons having a proprietary interest in the property on the back of this form.
- B. Property size: _____
- C. Water Supply: Existing _____ Permit Applied For _____
- D. Sanitary Sewer System: Existing _____ Permit Applied For _____
- E. Present Use of Property: _____

SMALL RURAL BUSINESS APPLICATION (Cont.)

III. BUSINESS USE INFORMATION

A. Proposed Use: _____

B. Proposed Hours of Operation: _____ -

C. Days: _____ -

D. Number of Persons Employed: _____

E. Number of Vehicles Used: _____

F. Number of Off-Street Parking Spaces Available: _____

G. Will any flammable or explosive materials be used or stored on site? Yes No

If yes, what are these materials?

IV. ATTACHMENTS

Please attach copies of the following if applicable:

A. Any Federal, State or County permits required for the purposed use.

B. A site plan showing the use, height and location of any buildings or other structures located on or which the applicant proposes to locate on the property.

C. Any other information that may be required by the Development Office.

SMALL RURAL BUSINESS APPLICATION
(Cont.)

I., A. (Cont)

Name: _____

Address: _____

Name: _____

Address: _____

I., B. (Cont)

Name: _____

Address: _____

Name: _____

Address: _____

II., A. (Cont)

Name: _____

Address: _____

Name: _____

Address: _____

PLOT PLAN INSTRUCTIONS

Draw out the entire tract of land as described in the Legal Description on the front of the application, giving the exact size of said tract, and showing the access road(s). Draw all existing buildings or structures as they are now located on the property. Also, any buildings that are proposed to be built and mark them with a "P". Mark the building that will be used for the Small Rural Business with an "X". Show area(s) to be used for parking and indicate the location(s) of sanitary facilities.

