

**SPECIAL USE PERMIT – MOBILE HOME QUESTIONNAIRE**

NAME: \_\_\_\_\_ TAX CODE # \_\_\_\_\_

THE HEARING OFFICER AND/OR BOARD OF ZONING APPEALS IS HERE TO CAREFULLY CONSIDER YOUR REQUEST. TO THIS END, IT IS IMPORTANT THAT THE HEARING OFFICER AND/OR BOARD FULLY UNDERSTANDS THE SCOPE OF YOUR REQUEST. PLEASE COMPLETE THE QUESTIONNAIRE. IF A QUESTION DOES NOT APPLY TO YOUR REQUEST, INDICATE NA (NOT APPLICABLE).

1. Type of request? \_\_\_\_\_  
\_\_\_\_\_
2. Is there a residence on site? \_\_\_\_\_ If yes, name the owner and occupant of the residence.  
\_\_\_\_\_
3. If the mobile home is existing, give the name of the previous permit holder. \_\_\_\_\_  
\_\_\_\_\_
4. Will the existing or proposed mobile home be located within 300 ft. from any existing habitable residential dwelling(s) not owned by the applicant? \_\_\_\_\_ If yes, give the distances.  
\_\_\_\_\_
5. Is there a hardship involved? If yes, explain in detail the nature of the hardship.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Is there an existing septic system on site for the mobile home? \_\_\_\_\_ Is there a water well?  
\_\_\_\_\_
7. Size of mobile home? \_\_\_\_\_ ft. x \_\_\_\_\_ ft. Year? \_\_\_\_\_ Make? \_\_\_\_\_
8. Have you had any conversation with your neighbors regarding your request? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. How will the Special Use be consistent with the spirit, purpose, and intent of the Zoning Ordinance?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
10. How will the Special Use not substantially and permanently injure the appropriate use of neighboring property? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
11. How will the Special Use substantially serve the public convenience and welfare? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

THIS QUESTIONNAIRE **MUST** ACCOMPANY YOUR APPLICATION. IF THE APPLICATION DOES NOT INCLUDE THE COMPLETED QUESTIONNAIRE, IT WILL BE CONSIDERED INCOMPLETE AND THE STAFF WILL NOT ACCEPT THE APPLICATION.