ORIG 12-23-05 REVISED 4-16-2021 FEE: \$750.00 DUE UPON APPLICATION, ADDITIONAL \$250.00 IF APPROVED TOWNSHIP OF PARTRIDGE ZONING ORDINANCE IUP# APPLICATION FOR INTERIM USE PERMIT DATE REC. **NAME** ADDRESS: PHONE #: LEGAL DESCRIPTION (MUST BE COMPLETE DESCRIPTION FROM YOUR DEED: LOT____BLOCK___SECTION___TOWNSHIP____ RANGE PARCEL# A INTERIM USE PERMIT IS REQUESTED PER SECTION_____ OF THE PARTRIDGE TOWNSHIP ZONING ORDINANCE FOR: THE PROPOSED CONDITIONAL USE IS IN A LAND USE ZONING DISTRICT. BRIEF NARRATIVE DESCRIPTION OF THIS REQUEST: ATTACH MAP, PLAN AND/OR OTHER INFORMATION PERTINENT TO THIS APPLICATION

NO APPLICATION FOR AN INTERIM USE WILL BE ACCEPTED BEFORE A PRE-APPLICATION MEETING WITH THE ZONING ADMINISTRATOR

DATE

SIGNATURE OF APPLICANT