

APPLICATION FOR CONDITIONAL USE PERMIT

This is an application for a Conditional Use Permit. The form must be completed and filed at the office of the Zoning Administrator in accordance with directions on the accompanying instruction sheet.

AN INCOMPLETE APPLICATION CANNOT BE ACCEPTED.

1. Name of applicant or applicants (owner (s) and/or their agent (s)). All owners of all property requested to be rezoned must be listed on this form.

A. Applicant/Owner Thomas R. + Jane L. Washburn
Address 3404 N. Kansas Rd., Newton KS Phone 316-283-5599
Agent _____
Address _____ Phone _____

Lessee WWC license, LLC, a Delaware limited liability company
B. Applicant/Owner d/b/a Western Wireless (cellular one)
Address 3650 13th Ave. SE #400 Phone _____
Agent Belleme, WA 98006
Address _____ Phone _____

Agent
C. Applicant/Owner Faulk + Foster
Address 2680 Horizon Dr. SE, Ste E Phone 616-975-0923 x 113
Agent Grand Rapids, MI 49544 Maureen VanHorn
Address _____ Phone _____

2. The applicant hereby requests an exception as a conditional use permit for the purpose of establishing a wireless communications facility

on property legally described as Lot(s) _____ Block(s) _____ of the _____ Addition.

(Metes and bounds descriptions shall be provided in the space below or on an attached sheet.)

The North 1/2 of the Southeast quarter of Section 6, Township 22 south, Range 3 east except public highway and exceptions as listed in deed book 389 at page 87 Marion County Register of Deeds, Marion County, Kansas

3. Development plan included? Yes No

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4. The general location may be described as West of Mustang Rd North
of 100th Street and South of 70th Street (Highway 50)

5. I request this conditional used permit for the following reasons: To provide
in building cellular one service in the City of Peabody and
extend coverage in both directions on High Way 50 to
link up with existing sites

6. I (we), the applicant(s), acknowledge receipt of the instruction sheet explaining the method of submitting this application. I (we) realize that this application cannot be processed unless it is completely filled in; is accompanied by an ariel photo as required in the instruction sheet; and is accompanied by the appropriate fee.

Signature of Record Land Owner: (Use separate sheet if necessary for names of additional owners/applicants.)

Thomas R + Jane L Washburn (redacted lease attached)
(Owner) (Owner)

WDC License LLC, a Delaware limited liability company d/b/a
(Owner) Western Wireless (cellular use) (Owner)

By Mike Vore
Authorized Agent (if any)

By _____
Authorized Agent (if any)

Faulkner Foster, by Maureen Van Horn

7. Office Use Only:

This application was received at the office of the Zoning Administrator at _____ (.M.) on _____ . It has been checked and found to be completed and accompanied by required documents and the appropriate fee of \$50.00.

Planning & Zoning Assistant

Date

Planning & Zoning Director

Date

Date of Public Hearing: _____

Date of Approval/Disapproval by Planning Commission: _____

Date of Recommendation to the County Commission: _____

Date of County Action: _____