



MARION COUNTY COURTHOUSE

MARION COUNTY KANSAS
OFFICE OF THE PLANNING COMMISSION

P.O. BOX 157
MARION, KANSAS 66861
PHONE (316) 382-2550
1-800-613-3080 (Toll Free From Area Code 316)
1-800-305-8848 (Toll Free From Area Code 785)

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 1806 Holly Alexanderfeld church / Hope Valley School
Address no address / mailing 448-180th Phone 620 483-3
Agent Treasure of School
Address Hillsboro Ks 67063 Phone 420-483-3696

B. Applicant/Owner James E. Gushock
Address 1820 Holly Phone 620 947 3663
Agent Land owner at school
Address Hillsboro Ks Phone _____

C. Applicant/Owner _____
Address _____ Phone _____
Agent _____
Address _____ Phone _____

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

2. The applicant hereby requests an exception as a conditional use permit for the purpose of establishing a Alexanderfeld church + Hope Valley Christian school
K thru 8
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.)

Part of S.W 1/4 section 4-20-2

3. Development plan included?

Yes

~~No~~

4. The general location may be described as _____

1 W + 1 S City of Hillsboro

5. I request this conditional used permit for the following reasons: Church

+ School and possible future development

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.

Ray Hiebert
(Owner)

James Sheehy
(Owner)

By Treasurer Ray Hiebert
Authorized Agent (if any)

By Landowner at School
Authorized Agent (if any)

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