

File #	
Date Filed	
Board Approval	
Fee \$ Per Ord. 1699 §3, 8-27-07	

**City of Hermann, Missouri**  
**PLANNING & ZONING COMMISSION**  
**CONDITIONAL USE PERMIT APPLICATION**

*Please indicate below which Conditional Use Permit is being Applied For:*

- Conditional Use Permit
- Liquor Sales for Outdoor Consumption – Commercial & Industrial Zoned – *More than 12 Operating Days per year*

*Please indicate below Zoning District – Check all that Apply:*

- |                              |                              |                              |                              |                              |                              |                              |                              |  |
|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|--|
| <input type="checkbox"/> R-1 | <input type="checkbox"/> R-2 | <input type="checkbox"/> R-3 | <input type="checkbox"/> C-1 | <input type="checkbox"/> C-2 | <input type="checkbox"/> U-1 | <input type="checkbox"/> I-1 | <input type="checkbox"/> I-2 | <input type="checkbox"/> Historical District |
| <input type="checkbox"/> A-G |                              |                              |                              |                              |                              |                              |                              |  |

*Please fill in all the information below:*

**Owner/Tenant:**

**Owner/Tenant Address:**

**Owner/Tenant Phone:**

**Address of Property:**

*Describe briefly the proposed conditional use:*

*Describe the number of sleeping rooms and maximum occupants anticipated:*

*Describe briefly how off-street parking requirements will be met (see Code 420.670):*

**Manager Name:**

**CONDITIONAL USE PERMITS ARE REVIEWED FOR RENEWAL ANNUALLY**

*Liquor Sales for Outdoor Consumption – Conditional Use Permit fill in information below:*

**Hours of Operation:**

**Maximum Occupancy:**

**Restrooms:**

**Type of Entertainment:**

**Other Pertinent Information:**

**OWNER/TENANT SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

City of Hermann, Missouri  
**PLANNING & ZONING COMMISSION**  
**CONDITIONAL USE PERMIT APPLICATION**

*For City of Hermann Office Use Only*

<b>File #</b>			
<b>Date Filed</b>			
<b>Date to Administrator</b>			
<b>Date of Notice</b>			
<b>Date of Planning &amp; Zoning Recommendation</b>			
<b>Date of Board of Aldermen Approval</b>			
<b>Dates Reviewed by Board of Aldermen</b>			

<b>Planning and Zoning Commission's Public Hearing Date:</b>		
Has Planning & Zoning reviewed the requirements set forth in City of Hermann Municipal Code <i>SECTION 420.730 - ITEM B (Revised 8/14/14)</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<b>Planning and Zoning Commission:</b>	<input type="checkbox"/> APPROVAL	<input type="checkbox"/> DENIAL
<b>Planning and Zoning Commission's Restrictions (if any):</b>		

<b>Board of Aldermen Public Hearing Date:</b>		
Board of Aldermen:	<input type="checkbox"/> APPROVAL	<input type="checkbox"/> DENIAL
<b>Board of Aldermen Restrictions (if any):</b>		

<b>Comments:</b>	
<b>APPROVED BY:</b>	<b>DATE:</b>