

REQUEST FOR CONDITIONAL USE PERMIT

COMPLETE ALL FIELDS AND ATTACH CHECKLIST – PLEASE PRINT LEGIBLY

~~\$225~~ ²⁴⁰ NON-REFUNDABLE APPLICATION FEE + COSTS

* 1. Faye Nowell
Print Name (Property Owner)
5550 W Gillespie Bridge Rd.
Address
Columbia, MO 65203 573-864-8280
City - State - Zip PHONE
elizamay77@gmail.com
EMAIL ADDRESS

Linda Munden
Print Name (Potential Buyer/Lessee)
3110 Skylark Drive
Address
Columbia, MO 65203 573-228-9456
City - State - Zip PHONE
lmunden60@gmail.com
EMAIL ADDRESS

* 2. LEGAL DESCRIPTION of land for which Conditional Use Permit application is made, including Section, Township and Range. Please attach copy of the current ownership deed and, if available, a survey.
Section 20, Township 48 North, Range 13 West
Current deed of ownership is attached, along with a historic survey.

* 3. Present zoning A-2 Current land use Agricultural with Residence

* 4. Lot/tract size 4.31 acres Acres/Sq. Ft. 5. Adjacent Zoning A-2, R-S & R-1

* 6. Classification and proposed use for conditional use: (Please be as detailed as possible in describing the proposed use. Attach additional page(s) if necessary)
Continued use of the property as a small private day care & boarding kennel after the property changes ownership. See attachments for details

* 7. Reason and justification for the request being submitted: (Attach additional page(s) if necessary)
Owner is retiring and wants to sell the property & the business to Linda Munden, to carry the business into the future in a like-minded manner.

* 8. Approximate size, use and location of all structures:
Existing: Residence (~3,000 sq. ft.) ; Dog House (720 sq. ft.) ; Office (256 sq. ft.)
Proposed: (none proposed)

* 9. Type of wastewater system: gray water to daylight

10. Additional fees to be paid by: Linda Munden 3110 Skylark Drive 573-228-9456
Name Address Phone Number

The above information is true and correct to the best of my knowledge. I have completed and submitted the required checklist and I understand that if I have not submitted the required documentation by the specified deadline this application will be invalidated and I may be required to re-apply.

Faye Nowell 4/21/23
Owner's Signature Date

Linda Munden 4-21-23
Potential Buyer's/Lessee's Signature Date

NOTE: Please attach any additional documentation, sketches, permits, names and addresses as required as minimum information. Failure to provide any of the required material(s) will result in the invalidation of this application. Do not email form. Original signature is required.

Received by [Signature]
Boone County Resource Management

Date 4/24/23