

CONDITIONAL USE PERMIT APPLICATION

To the Board of Adjustment
PO Box 37
Bridgewater SD 57319

Petition # _____
Date approved: _____
Expires: _____

Board of Adjustment:

I/We, the undersigned, do hereby petition the Board of Adjustment of Bridgewater, South Dakota, to issue a Conditional Use Permit for the property described as:

Legal Description(Please print or type): _____

General Area or Street Address: _____

Purpose: _____

Existing Land Use: _____

Existing Zoning: _____ Size of Parcel: _____

Surrounding Land Use: North: _____

South: _____

East: _____

West: _____

Petitioner (Print): _____

Signature: _____

Date: _____ Phone: _____

Address: _____

City

State

Zip

Owner (Print): _____

If different than above

Signature: _____

Date: _____ Phone: _____

Address: _____

City

State

Zip

Written Findings by the Board of Adjustment:
