



Town of Luray
Special Use Permit Application
Application No.: _____

Existing Property Information:

Site Address _____

Page County Tax Map Number _____ Town Zoning District _____

Total Acreage _____

Request Information:

Nature of Request (Describe property use, structure(s) construction, and affected Zoning Ordinance Sections)

Please include location map, plat, property deed, and impact analysis statement with your Application

I (we), the undersigned, do hereby respectfully make application and petition to the Town of Luray in order to utilize the subject property for a use which requires the issuance of a Special Use Permit. I (we) agree to comply with any conditions for the Special Use Permit required by the Town.

I (we) authorize Town of Luray officials to enter the property for site inspection purposes.

I (we) authorize the Town of Luray to place standard signage on the property necessary for notifying the public of this rezoning request during the application consideration process.

I (we) hereby certify that this application and its accompanying materials are true and accurate to the best of my (our) knowledge.

Signature of Applicant

Date

Signature of Applicant

Date

Signature of Owner

Date

Signature of Owner

Date