APPLICATION FOR A SPECIAL EXCEPTION

	Do not write in this space. Case No		
To: Board of Adjustment,	Date Filed		
Coös County Unincorporated Places			
	(signed - ZBA)		
Name of Applicant Address Owner (if same as applicant, write "same") Location of Property (street, number, sub-division and lot number) NOTE: This application is not acceptable unless all required statements have been made. Additional information may be supplied on a separate sheet if the space provided is inadequate. APPLICATION FOR A SPECIAL EXCEPTION			
		Description of proposed use showing justification for	a special exception as specified in the
		zoning ordinance, article	section
		Explain how the proposal meets the special exception	n criteria as specified in article
		section of the zoning ordinance (list all	_
		Criteria 1 -	
		Criteria 2 -	
Criteria 3 -			
Criteria 4 -			
Applicant (signature)	Date		