

CAMDEN COUNTY LAKE AREA PLANNING & ZONING

P&Z SUBMITTAL REQUIREMENTS & GENERAL INFORMATION:

NECESSARY ITEMS NEEDED WITH COMPLETED APPLICATION BY DEADLINE:

On Application:

- **Parcel ID Number:** This is on your tax receipt which you receive from the Collector's Office. Planning Department staff can also help you obtain your parcel number.
- **Directions:** To the property from the Hwy 5 & Hwy 54 junction.

With Application Bring:

- **Proof of Ownership:** General Warranty Deed. This can be obtained from the Recorder of Deeds Office (Courthouse, 3rd floor). If you are not the property owner we will also need a notarized Property Owners Authorization Form.
- **Site plan:** This requirement will vary depending on the type of submittal: A Rezoning requires a site plan and survey/plat with property description, showing the property and surrounding area, a PUD will require a detailed plan (called an Area Plan) of the property. For a CUP it will vary by request, but generally needs to show property lines, structures, and key features.
- **Fees:**
 - Rezone - \$800.00
 - CUP (Conditional Use Permit) - \$600.00
 - PUD (Planned Unit Development) - \$1000.00
 - Telecommunications CUP - \$2,000.00
 - Co-Location Adm. CUP - \$500.00

	DEADLINE 8:30 A.M. 12:00 P.M.	PUBLIC HEARING 5:30 PM	DECISION HEARING 5:30 PM	COUNTY COMMISSION HEARING 10 AM
REZONE				
CUP				N/A
PUD				N/A
TEL/CUP				

****BEFORE ANY STRUCTURES CAN BE BUILT OR DEVELOPMENT BEGINS, ALL APPROVED APPLICANTS ARE REQUIRED TO OBTAIN A CONSTRUCTION PERMIT FROM THE CAMDEN COUNTY LAKE AREA PLANNING & ZONING OFFICE.****

It is recommended that you, or someone to represent you, be present at any required hearings.

CAMDEN COUNTY LAKE AREA PLANNING & ZONING HEARING PROCESS APPLICATION

#1 Court Circle, Suite 15
Camdenton, MO 65020

E-Mail: pz@camdenmo.org
Web-site: www.camdenmo.org

Phone: 573-317-3860
FAX: 573-317-9114

* Applicant (s) Name: _____
 * Property Owner's Name (if different): _____
 * Mailing Address: _____
 * City / State / Zip+4: _____
 * Telephone: _____ FAX: _____ Cell #: _____
 E-Mail Address: _____
 Other Contact Information: _____

* Parcel Identification Number (Tax ID): _____
 * Section (s) - _____ * Township - _____ * Range - _____
 * Project Site 911 Address (If available): _____
 * Project Acreage - _____ Total Acres of Property - _____
 Current Zoning District - _____ Political Township: _____
 Current Subdivision Name: _____ Block & Lot Number (s): _____
 Directions to the Property: _____

*** REQUIRED INFORMATION FOR APPLICATION TO BE ACCEPTED.**

TYPE OF PROCESS REQUESTED:

FEE:

- | | | |
|--------------------------|---|-------|
| <input type="checkbox"/> | Zoning Map Change (Rezoning) _____ to _____ | _____ |
| <input type="checkbox"/> | Conditional Use Permit (CUP) | _____ |
| <input type="checkbox"/> | Planned Unit Development (PUD) | _____ |
| <input type="checkbox"/> | Amendment to the Unified Land-Use Codes | _____ |
| <input type="checkbox"/> | Amendment to the Camden County Master Plan | _____ |

IMPORTANT – APPLICATIONS MUST INCLUDE TO FOLLOWING TO BE CONSIDERED COMPLETE:

- Completed Application & Application Fee
- Map showing location of property & Site Plan of Property Showing Important Features (or Subdivision Plat)
- Proof of Property Ownership (Warranty Deed) & Legal Descriptions of all Properties Involved in Request
- CUP – Written Description of the Request & Detailed Site Plan of Project
- PUD – Detailed Area Plan & Written description as per Article 900 of the Unified Land-Use Codes

Applicant's Printed Name

Applicant's Signature

Date

(FOR OFFICE USE ONLY)

(RECEIVED DATE)

RECEIVED BY: _____

APPLICATION FEE: _____

CASE NUMBER: _____

FEES PAID: YES / NO

CAMDEN COUNTY LAKE AREA PLANNING & ZONING
Property Owner's Authorization Form

Parcel Identification Number (Tax ID) _____

Property Address _____

Township

Range

Section

Owner(s) of Property

Signature

Address of Owner

City / State / Zip Code

Phone

Notary

Date

Owner(s) of Property

Signature

Address of Owner

City / State / Zip Code

Phone

Notary

Date

Signature of Applicant

Date

Name of Applicant (Print or Type)