



Application # _____
Date Filed _____
Receipt # _____

City of Milton-Freewater
CONDITIONAL USE PERMIT APPLICATION

OWNER/APPLICANT: _____ PHONE: _____

MAILING ADDRESS: _____

ZONE IN WHICH CONDITIONAL USE IS REQUESTED: _____

ADDRESS: _____

AUTHORIZATION:

This request for a conditional use permit is initiated under the provisions of Title 10 of the Milton-Freewater City Code.

Explain your request as specifically as possible:

Attach a site plan which shows the following items to scale:

- 1) Site Plan
- 2) Other data as required by the Planning Commission

SIGNATURE OF OWNER _____ DATE: _____

CITY APPROVAL BY _____ DATE: _____

TITLE: _____