

Fireworks Summer 2024 \$300 paid

GRANT COUNTY NOTICE OF APPEAL
CONDITIONAL USE PERMIT/VARIANCE APPLICATION

DATE: March 11, 2024

PERMIT NUMBER CUP03112024

APPLICANT (PRINT): Even Erickson 605-467-1412 PHONE: 605-467-0844

Building Address 16370 482nd Ave Riv. 170

Applicant Address P.O. Box 67 Revella S.D. 57259 PHONE: _____

IF DIFFERENT THAN APPLICANT
ADDRESS (PRINT): Spirit of the Cuts Foundation 410 High Street Big Stone City

I/WE, THE UNDER SIGNED, DO HEREBY PETITION THE BOARD OF ADJUSTMENT OF GRANT COUNTY, SOUTH DAKOTA, TO ISSUE A **CONDITIONAL USE PERMIT OR VARIANCE** FOR

(CIRCLE APPROPRIATE REQUEST)

THE PROPERTY DESCRIBED AS: LEGAL DESCRIPTION (PRINT)

51240' of the N1475' of the W460' W 1/2 S E 1/4

PARCEL NUMBER: 01.48.22.4003

SITE STREET ADDRESS: 16370 482nd St Rev. 170, SD

EXISTING LAND USE: AG EXISTING ZONING: AG as Community/Charity
(CIRCLE ONE)

SIZE OF PARCEL: ACRES 11.78 LOT DIMENSIONS: WIDTH (FRONTAGE) 460 DEPTH 1240

SURROUNDING LAND USE: NORTH: AG
SOUTH: AG
EAST: AG
WEST: AG

CONDITIONAL USE PERMIT:

PLEASE DESCRIBE WHAT YOU PROPOSE TO DO AND WHY YOU ARE SEEKING A CONDITIONAL USE PERMIT

(ATTACH A SEPARATE SHEET OF PAPER IF NECESSARY).

Fireworks sales (short permit)

VARIANCE:

IF YOU ARE SEEKING A VARIANCE PLEASE PROVIDE A BRIEF STATEMENT OF THE VARIANCE DESIRED AND PLEASE **STATE THE HARDSHIP REQUIRING RELIEF**. (PROOF OF HARDSHIP IS ON THE APPLICANT - HARDSHIP EXAMPLES ARE ODD SIZE OR SHAPE OF THE LOT, UNUSUAL TOPOGRAPHY, ETC. ATTACH A SEPARATE SHEET OF PAPER IF NECESSARY).

SIGNATURE OF APPLICANT: DARWIN ERICKSON Darwin Erickson 3-11-2024

SIGNATURE OF OWNER (IF DIFFERENT THAN APPLICANT): _____

NOTE: A SKETCH OF PROPOSED PROPERTY SHALL ACCOMPANY THIS APPLICATION, SHOWING THE FOLLOWING:

1. NORTH DIRECTION
2. DIMENSIONS OF PROPOSED STRUCTURE
3. STREET NAMES
4. OTHER INFORMATION AS MAY BE REQUESTED
5. LOCATION OF PROPOSED STRUCTURE ON LOT
6. DIMENSIONS OF FRONT AND SIDE SETBACKS
7. LOCATION OF ADJACENT EXISTING BUILDINGS

THE BOARD OF ADJUSTMENT MAY REQUIRE THAT SUCH PLANS BE PREPARED BY A REGISTERED ENGINEER OR LAND SURVEYOR.

DATE FILED WITH ZONING OFFICER _____ FEE PAID (NON-REFUNDABLE) Y N _____

HEARING DATE & TIME _____ ACTION BY BOARD _____

Conditions of permit:

Application for South Dakota Retail Fireworks License

- * All information is to be typed or printed in ink
- * **Make checks payable to the Department of Public Safety** or payment may be made by credit card
- Mail both copies of the application to:
 - State Fire Marshal's Office
 - Fireworks Program
 - 221 South Central Avenue
 - Pierre SD 57501-2080
- * Check appropriate box for licenses needed for each business location

NOTICE All Applications must be received 15 days before the beginning of the sales period (SDCL 34-37-2)

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|--|------------------------------|--|
| 1. Retail Fireworks License- **** | Sales Period: June 27-July 5 | General Retail Sale |
| 2. Late Season Retail License***** | Sales Period: Dec 28-Jan1 | General Retail Sale |
| 3. Special Retail Fireworks License- | Sales Period: May 1-June 26 | For sale to out-of-state residents only |
| 4. Optional Retail Fireworks License***- | Sales Period: July 6-Aug 31 | For sale to out-of-state Residents only |
| | Sales Period: Dec 28-Jan1 | General Retail Sale |

Fee:

\$25.00	
\$25.00	
\$1,000.00	
\$1,000.00	

Dawn Erickson
3-11-2024