

Cemetery Services

Pa. 300

GRANT COUNTY NOTICE OF APPEAL
CONDITIONAL USE PERMIT/VARIANCE APPLICATION

DATE: 3/8/, 2024

PERMIT NUMBER CU03082024

APPLICANT (PRINT): Mark McCulloch PHONE: 605-949-1258
ADDRESS (PRINT): 14838 479th Ave Milbank markmc66@gmail.com
OWNER (PRINT): Mark & Ellen McCulloch PHONE: _____
IF DIFFERENT THAN APPLICANT
ADDRESS (PRINT): _____

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)

Tract of Land beginning at the SW corner S 1/2 NW 1/4, thence E 1,324.95' N

PARCEL NUMBER: 02.48.05, 2008

SITE STREET ADDRESS: same

EXISTING LAND USE: AG EXISTING ZONING: AG C/I PD NR
(CIRCLE ONE)

SIZE OF PARCEL: ACRES 33 LOT DIMENSIONS: WIDTH (FRONTAGE) _____ DEPTH _____

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

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).

Would like to provide Cemetery services from that location. Mostly stone equipment. Will do lettering and monument setting in cemeteries.

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: Mark McCulloch
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:
