## **CITY OF LYNDHURST**

## APPLICATION FOR HEARING BEFORE PLANNING COMMISSION

Person(s) making re	quest:	
Company Name (if a	oplicable}:	
Applicants interest	in or relationship to the prope	rty involved in this application:
City:	State:	Zip Code:
Phone:	E-mail:	
Address or descrip	otion of property for which a	a hearing is being sought:
What is the nature of y	our request to the Planning Com ONDITIONAL USE PERMIT, you w le to the CONDITIONAL USE bein	mission? Please describe below. If vill need to follow explicitly the
Is anyone other than the provide name(s) and e		tings on this request? If yes, please
Thursday of each m meeting shall be re (\$150.00). Special mee of the Chairperson, the	onth at 7:00 P.M., except that whe scheduled. The fee to attend a nation tings shall be held upon the call be Vice-Chairperson. The fee for t	Il be held at the City Hall on the fourth hen such day falls on a holiday, the neeting is one hundred-fifty dollars I of the Chairperson, or in the absence the Planning Commission Board is for \$75.00) fee for the third and each nce.
Person receiving appl	ication:	Date Rec'd: