

REQUEST FOR SPECIAL USE PERMIT

City of Rock Island Planning & Zoning Division
City Hall, 1528 3rd Avenue
Rock Island, Illinois 61201
Phone: (309) 732-2900 Fax: (309) 732-2930
Email: cedmail@rigov.org



APPLICANT/AGENT INFORMATION

Name:	Phone:
Address:	
Email:	

PROPERTY OWNER INFORMATION

Name:	Phone:
Address:	
Email:	

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If different from applicant, please attach notarized letter of authorization.*

APPLICATION INFORMATION

Street Address/Location:	
Tax Map/Parcel ID Number:	Zoning:
Legal Description:	
Current Use:	
Reason for request/Describe use:	
Proposed Signs:	
Proposed Access Point(s) and Parking:	
Property to the NORTH used for:	Property to the EAST used for:
Property to the SOUTH used for:	Property to the WEST used for:

Submittal deadline is approximately 30 days prior to proposed public hearing date; please refer to posted schedule.

Application Fee Legal Description Notarized Owner Authorization

Submitted by:	Date:
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