

File No.: CU-2025-02

ALBION, NEBRASKA

# REQUEST FOR CONDITIONAL USE PERMIT

Applicant Mollie & John Morrow Date 1/23/25  
Applicant Address 2350 250 St Phone 402-281-6247  
Albion, NE 68620

Hereby requests to a Conditional Use Permit for the following Use: Swimming Pool

The Conditional Use Permit is for the property legally described as (attach separate page if necessary): 17 20 6 # 24295 Seda's Lot split lot 2, Part of the SW 1/4 SE 1/4 17-20-6 3.64+ Acres MN 1404.4 The current Zoning of said Property is TA

Is the request Conditional Use allowable in the current Zoning District?  yes \_\_\_ no  
If the answer is no, then a Change of Zoning Request shall be processed prior to any Conditional Use being submitted.

### APPLICATION REQUIREMENTS (Submit information and fee with application)

- Complete legal description (including address)
- Existing zoning
- Existing use of property
- Proposed use consistent with zoning district

|                                      |
|--------------------------------------|
| OFFICE USE ONLY:                     |
| Application Fee: <u>\$100.00</u>     |
| Notice of Hearing: <u>2/19/25</u>    |
| Date to PC: <u>3/5/25</u>            |
| PC Action: _____                     |
| Date to City Council: <u>3/11/25</u> |
| Action: _____                        |

Additional Conditions placed upon use and property, if any, as determined by the Planning Commission and/or City Council:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_

I hereby certify that all required information and materials are herewith attached and said materials are true and accurate to the best of my knowledge.

Date 1/23/25 Applicant 