

**Administrative Approval  
Application**

Case # \_\_\_\_\_

**Sussex County, Delaware**

Hearing Date \_\_\_\_\_  
(where applicable)

Sussex County Planning & Zoning Department  
2 The Circle (P.O. Box 417) Georgetown, DE 19947  
302-855-7878 ph. 302-854-5079 fax

**Type of Application: (please check all applicable)**

- Manufactured Home-Type Structure for Business, Commercial or Industrial Use.
- Garage/Studio Apartment.
- Manufactured Home-Type Structure for Emergency or Hardship Situation.

Existing Structure:  
Proposed Structure:  
Code Reference (office use only)

\_\_\_\_\_  
\_\_\_\_\_

**Site Address:**

**Description of Request:**

**Tax Map #:**

**Property Zoning:**

**Applicant Information**

Applicant Name:

Applicant Address:

City: State

Zip:

Applicant Phone #:

Applicant e-mail:

**Owner Information**

Owner Name:

Owner Address:

City: State

Zip:

Purchase Date:

Owner Phone #:

Owner e-mail:

**Agent/Attorney Details**

Agent/Attorney Name:

Agent/Attorney Address:

City: State

Zip:

Agent/Attorney Phone #:

Agent/Attorney e-mail:

**Signature of Owner/Agent/Attorney**

Date:



**Criteria for a Special Use Exception:** (Please provide a written statement regarding each criteria)

*Applicant's must demonstrate that the property meets **ALL** of the criteria for a Special Use Exception to be granted.*

1. Such exception will not substantially affect adversely the uses of adjacent and neighboring property:

2. Any other requirements which apply to a specific type of Special Use Exception as required by the Sussex County Code (such as the maximum amount of time permitted):

## Check List for Applications

The following shall be submitted with the application

- **Completed Application**
- **Provide a Site Plan or survey of the property** (Special Use Exception)
- **Provide Fee \$50.00**
- **Provide written response to criteria for Special Use Exception** (may be on a separate document if not enough room on the form)
- **Copy of Receipt (staff)**
- **Optional - Additional information to be considered** (ex. photos of site, photos of manufactured home type structure, letters from neighbors, etc.)
- **Please be aware that Public Notice will be sent to adjacent property owners of the subject site and County staff may come out to the subject site, to take photos and/or make observations of the site. The Director of Planning & Zoning will then determine whether the application may be approved administratively.**
- **Please be aware that, should objections be received that the application may be scheduled for a public hearing before the Board of Adjustment, Staff will place a sign on the site stating the date and time of the Public Hearing for the application. The Applicant, or a representative of the Applicant must be present if a public hearing is scheduled.**

*\*Please be advised that the decision of the Director/Board of Adjustment is only final when the written decision is filed with the Board of Adjustment's secretary. To determine whether the written decision has been filed, you may call the Planning & Zoning Department at 302-855-7878. The written decision is generally completed within thirty (30) to sixty (60) days following the Board's vote on the application. Please include the case number when calling about the decision.*

*\*Please be advised that any action taken in reliance of the Board's/Director's decision prior to the filing of the written decision and the expiration of any applicable appeal period is taken at the Property Owner's Risk.*

The undersigned acknowledges that that he or she has read the application completely and that if the appellant / applicant is unable to convince the Director/Board that the standards for a Special Use Exception have been met, the application will be denied.

Signature of Owner/Agent/Attorney

Date:

For office use only:

Date Submitted: \_\_\_\_\_ Fee: \$50.00 Check #: \_\_\_\_\_

Staff accepting application: \_\_\_\_\_ Application & Case #: \_\_\_\_\_

Location of property: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot#: \_\_\_\_\_ Block#: \_\_\_\_\_

Date of Hearing: \_\_\_\_\_ Decision of Board: \_\_\_\_\_