

CITY OF FORT PIERRE

SPECIAL USE PERMIT REQUEST FORM

Applicant Information (Please type or print)

Property Owner Name

Mailing Address

City

State

Zip

Contact Person

Phone Number

Property Information

Legal Description of Property

Address of Property

Description of Special Use

Signature

I hereby request the above described Special Use and also state that I am the true and correct owner of the above described property.

Signature

Date