

COUNTY OF MORGAN  
STATE OF WEST VIRGINIA  
COMMERCIAL AND INDUSTRIAL  
IMPROVEMENT LOCATION PERMIT  
PRE-APPLICATION

- 
1. BUSINESS NAME: \_\_\_\_\_ DATE OF APPLICATION \_\_\_\_\_
  2. OWNER: \_\_\_\_\_ PHONE: \_\_\_\_\_
  3. DEVELOPER: \_\_\_\_\_
  4. ADDRESS: \_\_\_\_\_
  5. HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_ FAX #: \_\_\_\_\_
  6. NAME OF SURVEYOR/ENGINEER: \_\_\_\_\_ PHONE: \_\_\_\_\_
  7. DISTRICT: \_\_\_\_\_ TAX MAP: \_\_\_\_\_ PARCEL: \_\_\_\_\_  
SITE LOCATION: \_\_\_\_\_
  8. DESCRIPTION of BUSINESS: What Type of Business Are You Planning (Retail, Wholesale, Service)  
\_\_\_\_\_
  9. WHAT PRODUCT WILL YOU SELL? \_\_\_\_\_
  10. WILL THERE BE ANY HAZARDOUS SUBSTANCES (MATERIALS) OR EXPLOSIVES ON SITE:  
\_\_\_\_\_ IF SO, PLEASE DESCRIBE: \_\_\_\_\_
  11. WHAT TYPE OF BUSINESS OPPORTUNITY? (New, Part-Time, Expansion, Seasonal, Year-Round)  
\_\_\_\_\_
  12. HOW MANY CUSTOMERS WILL BE VISITING ON AN AVERAGE DAY? \_\_\_\_\_
  13. BUILDING DIMENSIONS: \_\_\_\_\_
  14. # OF PARKING SPACES: \_\_\_\_\_ # OF HANDICAP SPACES: \_\_\_\_\_
  15. ESTIMATED COST: \_\_\_\_\_ ESTIMATED COMPLETION DATE \_\_\_\_\_
  16. BRIEF DESCRIPTION OF TYPE OF OPERATION: \_\_\_\_\_  
\_\_\_\_\_
  17. HOW MANY EMPLOYEES WILL BE NEEDED? \_\_\_\_\_
  18. WHAT IS THE ESTIMATED MAXIMUM NUMBER OF EMPLOYEES? \_\_\_\_\_
  19. HOURS OF OPERATION: \_\_\_\_\_
  20. NUMBER OF ENTRANCES AND EXITS FROM COUNTY ROUTE: \_\_\_\_\_

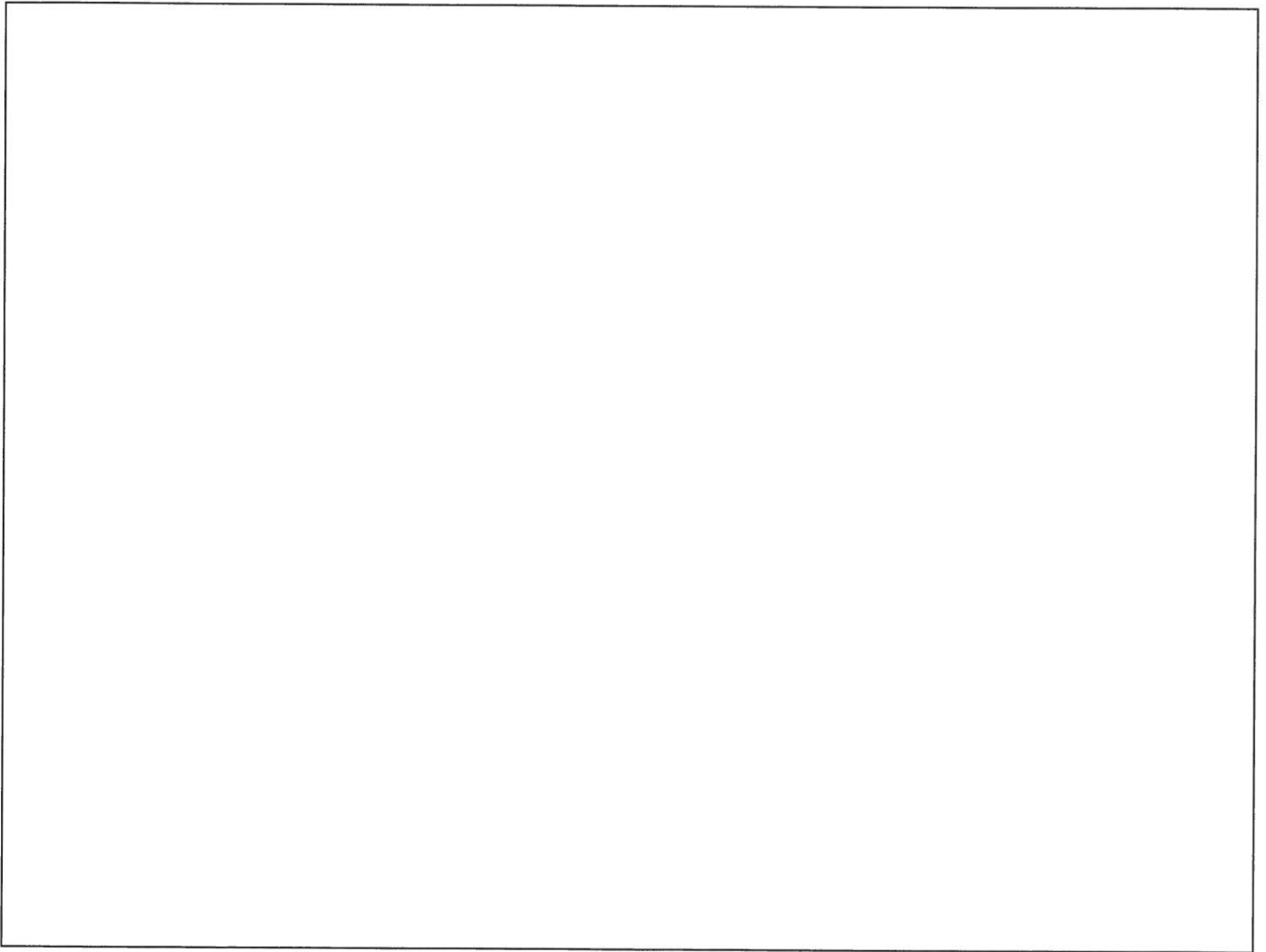
21. IS THERE THE POSSIBILITY OF FUTURE EXPANSION: \_\_\_\_\_

**NOTE: Written Approval of Water & Sewer is Required.**

**SIGNATURE of APPLICANT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

PLEASE SKETCH THE SITE INCLUDING: (1) Well (2) Central Sewage/Septic System Lines (3) New Building(s) to be Constructed (4) Roadways (5) Existing Structures.

**DRAWING OF PROPOSED SITE:**



The Section Below to be Completed By Planning Commission Staff:

REQUIRES PLANNING COMMISSION REVIEW: YES \_\_\_\_\_ NO \_\_\_\_\_

PLANNING COMMISSION REVIEW DATE: \_\_\_\_\_

PERMIT OFFICER: \_\_\_\_\_

**MORGAN COUNTY  
COMMERCIAL AND INDUSTRIAL  
IMPROVEMENT LOCATION PERMIT  
SITE PLAN DATA CHECKLIST**

<b>Section 3.2 Site Plan Format</b>	<b>Addressed</b>	<b>Not Applicable</b>
1. Landscaping Plan	_____	_____
2. Fencing	_____	_____
3. Exterior Lighting (Location, Height & Lamp Specifications)	_____	_____
4. Interior Roadways and Off Street Parking	_____	_____
5. Pedestrian Walkways and Sidewalks	_____	_____
6. Provisions for Solid Waste Collection	_____	_____
7. Open Space and Recreational Facilities	_____	_____
8. Communication Antennas (TV, Radio, Satellite)	_____	_____
9. Transit/School Bus Waiting Areas	_____	_____
10. Signs (Location, Size, Height, and Design)	_____	_____
11. Proposed Land Uses, Showing Building Locations	_____	_____
12. Location of Material Storage	_____	_____
13. Location of Special Facilities for Refuse Collection, Mail Delivery, etc.	_____	_____
14. Storm Water Management Provisions Sediment Erosion Control	_____	_____
15. Traffic Flow and Control Devices	_____	_____