

**REQUEST FOR CONDITIONAL USE PERMIT**  
COMPLETE ALL FIELDS AND ATTACH CHECKLIST – PLEASE PRINT LEGIBLY  
\$240 NON-REFUNDABLE APPLICATION FEE + COSTS

\* 1. **Stadium West Properties**

Print Name (Property Owner)  
8514 Liberty Rd  
Address  
JEFFERSON CITY, MO 65039 573-634-4800  
City - State - Zip PHONE  
kfarmer@farmercompanies.com  
EMAIL ADDRESS

Print Name (Potential Buyer/Lessee)  
  
Address  
  
City - State - Zip PHONE  
  
EMAIL ADDRESS

\* 2. LEGAL DESCRIPTION of land for which Conditional Use Permit application is made, including Section, Township and Range. Please attach copy of the current ownership deed and, if available, a survey.

S-24, T-45N, R-12W Deed Attached

\* 3. Present zoning A-2 Current land use Mining

\* 4. Lot/tract size 15.27 Acres/Sq. Ft. 5. Adjacent Zoning A-R, A-2

\* 6. Classification and proposed use for conditional use: (Please be as detailed as possible in describing the proposed use. Attach additional page(s) if necessary)

Quarrying activities; Removing overburden, blasting rock, crushing rock, screening rock, selling rock.

\* 7. Reason and justification for the request being submitted: (Attach additional page(s) if necessary)

acquired the land to mine Limestone. See attached letter/proposal

\* 8. Approximate size, use and location of all structures:

Existing: None

Proposed: \_\_\_\_\_

\* 9. Type of wastewater system: \_\_\_\_\_

10. Additional fees to be paid by: Capital Quarries Company, Inc. P.O. Box 105050 573-634-4800  
Name Address Phone Number

The above information is true and correct to the best of my knowledge. I have completed and submitted the required checklist and I understand that if I have not submitted the required documentation by the specified deadline this application will be invalid and I may be required to re-apply.

[Signature] 1/8/2024  
Owner's Signature Date

\_\_\_\_\_  
Potential Buyer's/Lessee's Signature Date

**NOTE:** Please attach any additional documentation, sketches, permits, names and addresses as required as minimum information. Failure to provide any of the required material(s) will result in the invalidation of this application. Do not email form. Original signature is required.

Received by [Signature]  
Boone County Resource Management

Date 5/28/24

**REQUEST FOR CONDITIONAL USE PERMIT**  
COMPLETE ALL FIELDS AND ATTACH CHECKLIST – PLEASE PRINT LEGIBLY  
\$240 NON-REFUNDABLE APPLICATION FEE + COSTS

\* 1. Land Investment LLC

Print Name (Property Owner)

221 Bolivar St STE 400

Address

Jefferson City, MO 65101 573-635-2255

City - State - Zip

PHONE

kfarmer@farmercompanies.com

EMAIL ADDRESS

Print Name (Potential Buyer/Lessee)

Address

City - State - Zip

PHONE

EMAIL ADDRESS

\* 2. LEGAL DESCRIPTION of land for which Conditional Use Permit application is made, including Section, Township and Range. Please attach copy of the current ownership deed and, if available, a survey.

S-24, T-45N, R-12W Deed Attached

\* 3. Present zoning A-2 Current land use Residential

\* 4. Lot/tract size 42 Acres/Sq. Ft. 5. Adjacent Zoning A-2

\* 6. Classification and proposed use for conditional use: (Please be as detailed as possible in describing the proposed use. Attach additional page(s) if necessary)

Quarrying activities; Removing overburden, blasting rock, crushing rock, screening rock, selling rock.

\* 7. Reason and justification for the request being submitted: (Attach additional page(s) if necessary)

acquired the land to mine Limestone. See attached letter/proposal

\* 8. Approximate size, use and location of all structures:

Existing: House north central of property, 2,300 Sq. ft. (will be removed)

Proposed: \_\_\_\_\_

\* 9. Type of wastewater system: \_\_\_\_\_

10. Additional fees to be paid by: Capital Quarries Company, Inc. P.O. Box 105050 573-634-4800  
Name Address Phone Number

The above information is true and correct to the best of my knowledge. I have completed and submitted the required checklist and I understand that if I have not submitted the required documentation by the specified deadline this application will be invalidated and I may be required to re-apply.

[Signature] 11/8/2021  
Owner's Signature Date

\_\_\_\_\_  
Potential Buyer's/Lessee's Signature Date

**NOTE:** Please attach any additional documentation, sketches, permits, names and addresses as required as minimum information. Failure to provide any of the required material(s) will result in the invalidation of this application. Do not email form. Original signature is required.

Received by Paula Curcio  
Boone County Resource Management

Date 5/28/24