ZONING DISTRICT AMENDMENT APPLICATION

For Changing Zoning District Designation **Fee: \$200**

PROPERTY OWNER NAME (Last, First):	
ADDRESS (House Number and Str	reet):
CITY, STATE, ZIP:	
TELEPHONE:	EMAIL ADDRESS:
I would like to rezone my property because	from to
ATTACH A LEGAL DE	ESCRIPTION OF PROPERTY TO THIS FORM
ADDRESS OF SUBJECT PROPER	ΓY:
EXISTING AND PROPOSED USE OF PROPERTY:	
NAME, ADDRESS & PHONE NUMBER OF ALL OTHER PERSONS, FIRMS, etc. HAVING A LEGAL CONNECTION TO THE SUBJECT PROPERTY:	
OWNER'S SIGNATURE:	DATE:
CASE # FILING DAT	-OFFICIAL USE- E FEE PAID RCD BY

APPROVED FOR PC MEETING DATE _____