

Permit Number

APPLICATION

ZONING CHANGE-

Requirements

Please	review the following require	ements. Your application will not be a	ccepted if any of the below items	are missing or incomplete.
		rty identified by metes and bounds a ch the property is located, and on whi es	, •	•
	Payment of rezoning fee: \$	\$500.00 for properties less than 10 ac		
	All materials and application application of the Commission meeting and application and applic	on must be received by Planning Dep ng date	artment at least 35 days prior to t	he scheduled Planning and
Applic	ant Information			
Applic	ant Name:			
Applic	ant Address:			
		Applicant Email:		
		nt is not the owner, an affidavit must		
Owne	r Name:			
Owne	r Address:			
Owne	r Phone:	Owner Email:		
Prope	rty Information			
Prope	rty Address:			
Prope	rty Legal Description: _			
Prese	nt Use of Property:			
Preser	nt Zoning of Property: _		_	
Desire	ed Zoning of Property: _			
	cant Agreement			
		have read and completed all applicable re ation, my application may be rejected and		e submitted an incomplete
Signat	ure of Applicant:			Date:

Page 2 of 2 Revised October 2019

For Office Use Only						
Completeness Check						
Application form completely filled and signed?	□Yes	□ No				
Attached site plan?	□Yes	□ No				
Attached legal description of property?	□Yes	□ No				
Fee paid?	□Yes	□ No				
Sign Date						
Preliminary Planning and Zoning Review						
Current zoning: Proposed zoning:						
Required attachments are complete and correct?	□Yes	□ No				
Is proposed use permitted under requested zoning?	□Yes	□ No				
Sign Date						