

APPLICATION FOR CHANGE OF ZONING CLASSIFICATION (REZONING) OR
A CONDITIONAL USE PERMIT

This is an application for change of zoning classification (rezoning) or for a Conditional Use Permit. The form must be completed and filed at the office of the Zoning Administrator in accordance with directions on the accompanying instruction sheet.

AN INCOMPLETE APPLICATION CANNOT BE ACCEPTED.

1. Name of applicant or applicants (owner(s) and/or their agent(s)). All owners of all property requested to be rezoned must be listed in this form.

A. Applicant/Owner

Address

Address

Phone

B. Agent

Address

Address

Phone

(Use separate sheet if necessary for names of additional owners/applicants.)

2. The applicant hereby requests:

_____ A change of zoning from _____ to _____.

_____ A Conditional Use for the following:

3. The property is legally described as (Lot and Block or Metes and Bounds).

4. This property address is:

The general location is (use appropriate section):

A. At the _____ (NW, NE, SW or SE) corner of (street/road) and _____ (street/road) or,

B. On the _____ (N, S, E, W) side of _____ (street/road) between _____ (street/road) and (street/road).

5. I request this change in zoning for the following reasons (Do not include reference to proposed uses for a rezoning)

6. I (We), the applicant(s), acknowledge receipt of the instruction sheet explaining the method of submitting this application. I (We) realize that this application cannot be processed unless it is completely filled in; is accompanied by an ownership list as required in the instruction sheet; and is accompanied by the appropriate fee.

(Owner)

(Owner)

By _____

By

Authorized Agent (if any)

Authorized Agent (if any)

OFFICE USE ONLY:

This application was received at the office of Zoning Administrator at _____ (a.m. or p.m.) on _____ day of _____, 20___. It has been checked and found to be complete and accompanied by the required documents and the appropriate fee of \$ _____.

Name:

Title: