

APPLICATION FOR A ZONING CHANGE

(To be completed by Applicant)

Date _____

1) Application No. _____ Hearing Date _____

2) Applicant's Name _____ Phone _____

Address _____

Applicant's Name _____ Phone _____

Address _____

Applicant's Name _____ Phone _____

Address _____

3) Present Owner Name and Address _____

4) Present Zoning _____

Present Use of Property _____

5) Proposed Zoning _____

Desired Use of Property _____

6) Property Description: Section _____ Township _____ Range _____

7) Additional Comments _____

8) Surrounding Landowners (within 1000 feet):

Name _____ Parcel ID# _____

Address _____

Name _____ Parcel ID# _____

Address _____

Name _____ Parcel ID# _____

Address _____

Name _____ Parcel ID# _____

Address _____

Name _____ Parcel ID# _____

Address _____

Name _____ Parcel ID# _____

Address _____

Name _____ Parcel ID# _____

Address _____

Applicant's Signature

Owner's Signature

ZONING CHANGE FEE: \$250.00 **DATE PAID** _____
