## APPLICATION FOR REZONING

Cas	se #				
He	aring	Date			
Da Ap	te Fi prov	led ed/Disapproved	<del></del>		
Thi Pla she	nnin	an application for chang and Zoning Department	age of the Zoning Map. The form nent in accordance with directions	must be completed and filed in the on the accompanying instruction	
AN	INO	COMPLETE APPLICA	ATION CANNOT BE ACCEPTED	D	
1.	Name of applicant or applicants (owner(s) and/or their agent or agents). All owners of all property requested to be rezoned must be listed in this form.				
	a.	Applicant/Owner			
		Address		Phone	
		Agent			
		Address		Phone	
	(Us	se separate sheet if nec	essary for additional owners/appli	cants.)	
2.	dis	e applicant hereby requestrict for property legall wailable):	uests a change of zoning fromy described as (may attach copy of	zoning district to zoning typed legal description of property	
3.	The general location is (use the appropriate section):				
	a.	Street Address:located at theand	(NW, NE, SW, SE) corne	er ofand	
		OR			
	b.		(N, S, E, W) side of and	and	

4.	Relation to future land use plan.			
	a. Future land use map			
	b. Major streets:			
5.	(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 out, accompanied by the warranty deed showing ownership, a map showing the area to be rezoned, a list of property owners within one hundred eighty-five (185) feet and the appropriate fee as required on the fee chart.			
	Owner	Owner		
	Ву	By		
	Authorized Agent (if any	Authorized Agent (if any)		
This	FICE USE ONLY: s application was received a (diamondal diamondal d	ne Planning and Zoning office at(A.M.) (P.M.) or month, year). It has been checked and found to be complete and its and the appropriate fees.		
\$ Filing Fee  \$ Certified    Total		Certified Mailing (when required)		
		Name		
		Title		
Nun	aber of protest petitions file	% of land .		