



Development & Engineering Services

Application for Public Hearing for Zoning Action or Code Amendment

Complete this page and follow the directions on page 2 for each of the following requests:

- Code Amend.
 Rezoning
 Cond. Use
 Planned Unit Dev.
 Similar Use Det.
 Site Plan Mod.

Applicant Name: _____

Mailing Address: _____

Phone Number: _____

E-mail Address: _____

Owner Name**: _____

Mailing Address: _____

Phone Number: _____

OFFICE USE ONLY	
Filing Date	_____
Hearing Date	_____
Case No.	_____

**** If Applicant is other than owner, written consent of owner is required for variance.**

Location of Use.

Street Address: _____

(north, south, east, west) side of _____, _____ feet

(north, south, east, west) from the intersection of _____

Subdivision: _____ Lot No.: _____ Section: _____

Case Description.

Present Zoning District: _____ Total Acres: _____

Requested Zoning District (for rezoning requests only): _____

Description of the existing use of property: _____

Description of proposed use of property: _____

Reason for Zoning Request or Code Amendment: _____

Applicant/Owner _____ Date _____

Zoning Administrator _____ Date _____

FILING FEES (office use only):	
Code Amendment (\$100.00):	_____
Site Plan Modification (\$100.00):	_____
Similar Use Determination (\$100.00):	_____
Conditional Use (\$100.00):	_____
Planned Unit Development (\$200.00):	_____
Rezoning (\$150.00):	_____
Receipt No.: _____	TOTAL: _____