

REZONING APPLICATION

Application Type	Fee	Escrow*
Rezoning	\$150	\$500

Applicant Informati	on		
Name			
Phone		Fax	
Address			
Email Address			
Owner Information	(If different from applicant)		
Name			
Phone		Fax	
Address			
Property Information	on		
Address/Location			
Parcel Number	70	Size (acres)	
Current Zoning		Zoning Requested	
Adjacent Zoning	North: South:		
Master-Planned Zon	ning	Consistent with Master Plan?	
Other Information Does Property Abut	Township Border?		
Present Use of the S			
Number & Type of E	xisting Structures?		
	cated on a Paved Road?		
Municipal Sewer wit	thin 2,700 Feet of Subject Property? _		
Townsh procedu	The architect, engineer, planner, or design ip Ordinance books and following requireures as stated in Section 27.08. Please submution with the application.	ements for zoning amendments and	
I hereby attest the in	nformation on this application is, to th	e best of my knowledge, true and accurate.	
Signature of applicant		Date	

^{*} To cover cost of legal and consulting fees, may be increased as necessary

NOTICE

IF I PLAN TO SPLIT THE PARCEL(S) AFTER THE ZONING APPROVALS ARE GRANTED, I REALIZE THAT I MUST APPLY FOR A LAND DIVISION WITH THE ASSESSING DEPARTMENT. ALL LAND DIVISION REQUIREMENTS MUST BE CONFORMED TO BEFORE PROCEEDING WITH FURTHER DEVELOPMENT.

Signature of applicant	:	Date	
For Office Use Only			
Date Received		Fee Paid?	
Materials Received:	Site Plans	Location Map	
	Survey	Legal Description	
Dated copy of approv	ed minutes sent to applicant?	Date Sent	
	PLANNING COMM	SSION USE ONLY	
Approval			
Tabled			
Denied			
Conditional Approval			
-			
The following conditi	ons shall be met for approval:		
Signature of Planning	Commission Chair	Date	