# Request for Rezoning Application Form

Instructions: Submit five (5) hard copies and one (1) electronic PDF version of plans along with applicable application fee.

**FOR OFFICE USE ONLY**

Application Number: _____ Application Date: _____

Fee Paid: _____ Reviewed By: _____

Approval Date: _____ Approved By: _____

See "Fee Schedule – Section 412.010" for applicable fee for submission with this application.

**Application Type:** ☐ Area Plan ☐ Final Development Plan ☐ Section Plan

**Project Name**: _____

**Location/Subdivision:** _____

Current Zoning: _____ Gross Acreage/Square Footage: _____

Current Land Use: _____

Proposed Land Use/Zoning: _____ Rezoning Requested: ☐ Yes ☐ No

Type of Plan: ☐ Commercial ☐ Industrial ☐ Residential

Number of Buildings: _____ Number of Units: _____

**Brief Description of Project:** _____

_____

_____

**Contact Information:**

Applicant Name: _____ Phone: _____

Company: _____

Address: _____

E-mail: _____ Fax: _____

Engineer/Surveyor/Designer: _____ Phone: _____ Email: _____

Name of Property Owner (if different than applicant): _____

I, the undersigned do certify the accuracy of the information given on all the above.

_____

**Signature of Applicant** **Print Name** **Date**