



Planning & Zoning Application

APPLICANT INFORMATION

Applicant _____ Phone _____

Address _____ Fax _____

City, State _____ Zip _____

Email _____ Cell Phone Number _____

Property Owner _____ **Phone** _____

(if different than applicant)

Address _____ Fax _____

City, State _____ Zip _____

Billing Contact _____ **Phone** _____

Address _____ Fax _____

City, State _____ Zip _____

SITE/PROJECT INFORMATION

Name of Project _____

Parcel ID No. _____ Project Address _____

Attach Legal Description of Property

Property Location: On the _____ Side of _____ Road; Between _____ Road and _____ Road. Size of Lot: Width _____ Depth _____

Acreage of Site _____ Total Acres of Site to Review _____ Current Zoning of Site _____

Project Description: _____

Is a re-zoning of this parcel being requested? (If yes, complete next line) YES NO

Current Zoning of Site _____ Requested Zoning _____

SPECIAL PERMIT INFORMATION

Does the Proposed Use Require Special Approval? (If yes, complete next line) YES NO

Section of Zoning Ordinance for which you are applying _____

Applicant Signature _____

Date _____

In addition to city fees, projects will be charged an escrow amount based on the estimated cost of outside consultant review.

If translation services are needed to complete or understand documents, please contact the department head to request accommodations.

إذا كانت هناك حاجة لخدمات الترجمة لإكمال أو فهم المستندات، يرجى الاتصال بمشرف القسم لطلب الإقامة.

যদি নথি সম্পন্ন বা বোঝার জন্য অনুবাদ পরিষেবার প্রয়োজন অনুগ্রহ করে বাসস্থানের জন্য অনুরোধ করার জন্য ডিপার্টমেন্ট প্যারভাইজারের সাথে যোগাযোগ করুন।