



## **Zoning Change Application**

**Reviewed by:**

Planning & Zoning and City Council

**Location:**

City Hall Council Chambers at 205 S. Main Street

**Application Fee:**

**Fees will be billed as accumulated**

**Note:**

Only complete application submittals will be reviewed.



Project Number: \_\_\_\_\_

## Zoning Change Application

Today's Date: \_\_\_\_\_

**\*\*Contact Information\*\***

Property Location: \_\_\_\_\_  
(street address)

Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_

Acreage: (if acreage, provide separate metes and bounds description) \_\_\_\_\_

Existing Use and Current Zoning of Property: \_\_\_\_\_

Property Owner/Applicant Owner: \_\_\_\_\_  
(Name) (Address) (City, State, & Zip Code)

Property Owner Signature: \_\_\_\_\_

\_\_\_\_\_  
(Email)

\_\_\_\_\_  
(Phone)

**\*\*REQUEST\*\***

**PLEASE DESCRIBE YOUR REQUEST IN DETAIL.**

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