

REQUEST FOR REVISION TO THE ZONING MAP

PLEASE PRINT ALL

1. Name - Property Owner Potential Buyer/Lessee
Address
City State/Zip Phone

2. Legal Description of land for which revision to zoning map application is made. Please attach copy of Warranty Deed, Deed of Trust, or survey.

Section Township Range

3. Present zoning and actual land use:

4. Lot/tract size: Acres / Sq. Ft. 5. Requested zoning district:

6. Adjacent zoning

7. Proposed use should the request to rezone be approved: (Please be as detailed as possible in describing the proposed use)

8. Reason and justification for the request being submitted:

9. Approximate size, use and location of any structure(s):

Existing: Proposed:

10. Type of wastewater system:

\*Application FEE of \$300.00 paid at submission\*
\*\*If requesting PLANNED ZONING, Review Plan FEE of \$250.00 paid at submission (in addition to application fee)\*
\*\*\*Certified Mailings (\$6.85 per notice, or current certified mailing cost) and Newspaper fees must be paid prior to the Monday before the scheduled meeting.

The above information is true and correct to the best of my knowledge.

Owner's Signature Date Potential Buyer's/Lessee's Signature Date

Representative: (Surveyor, Engineer, Attorney, Etc.)

Name Office Phone Number

Address \*\*\*Additional fees to be paid by Representative \*\*\*Additional fees to be paid by Owner

(If neither are checked bill will be sent to representative)

NOTE: Please attach any additional documentation, sketches, permits, names, and addresses as required as minimum information. Failure to provide any of the required material will result in the invalidation of the application.

Received by: Boone County Planning and Building Inspections Date