



Office Use Only
Case Number: _____
Fees Paid: _____
Date Filed: _____
Date Approved by Board: _____

APPLICATION FOR CONSIDERATION OF PLANNING REQUEST

Street Location of Property: _____

Legal Description of Property:

Owner:

Name: _____

Address: _____

City: _____ State _____ Zip _____

Applicant (if other than owner)

Name: _____

Address: _____

City: _____ State _____ Zip _____

Type of Request: _____ Minor Subdivision _____ Conditional Use Permit
 _____ Major Subdivision _____ Special Use Permit
 _____ Variance _____ Other

Description of Request: _____

Present Zoning: _____

Existing Use of Property: _____

Has a request for rezoning, variance, subdivision, conditional use permit or special use permit on the subject site or any part thereof been previously sought? _____

If so, when? _____

Signature of Applicant: _____

Date: _____