

APPLICATION FOR MAP AMENDMENT FOR PDD
ZONING COMMISSION & BOARD OF TRUSTEES

FEE - \$300.00 - NON-REFUNDABLE

TYPE OR PRINT - BLACK INK ONLY

Assign Township Application # _____ Date Application Filed _____

1) Name of Applicant: _____

2) Address of Applicant: _____

3) Phone Number: Residence _____ Business _____

4) Name of Owner: _____

5) Address of Owner: _____

6) Phone Number: Residence _____ Business _____

7) Location and address of area to be amended: _____

8) Attach three (3) copies each of the legal description and maps (tax map or equal).

9) Present allocated use: _____

10) Proposed allocated use: _____

11) List of owners of property in PDD (use separate sheet).

12) The existing use allocation: _____

13) The proposed use would be better because: _____

14) The above information and attachments are true and accurate to the best of my knowledge.

Date: _____ Signature of Landowner/Lessee: _____

Received by the Zoning Commission: _____

Notice sent to owners (date): _____

C.D.P. map changed _____

Signature of Township Clerk: _____