

## REZONING APPLICATION FORM

Property Owner:

Name:  
Address:

Phone:

Applicant:  
(if different from owner)

Name:  
Address:

Phone:

Tax Parcel Number(s):

Existing Zoning:

Proposed Zoning:

Acreage of Proposal:

Location of Property:

If the proposed rezoning request is **only** for a portion of a parcel, the applicant must submit with the application a map showing the parcel and the exact location of the portion of the parcel that is proposed to be rezoned. The map must show the dimensions of the proposed portion to be rezoned and indicate, using dimensions, where the proposed rezoning area lies within the parcel.

Signature:

Date:

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