

APPLICATION FOR

ZONE CHANGE _____ CONDITIONAL USE PERMIT _____ APPEAL _____
WEIMAR PLANNING & ZONING COMMISSION
CITY OF WEIMAR

P&Z Case No. _____ Date : _____

APPLICANT _____ Phone _____

Address _____

OWNER _____ Phone _____

Address _____

STREET LOCATION _____

Legal Description: Lot/Tract _____ Block _____ Subdivision _____

Existing Zoning _____ Requested Zoning _____

Present Use of Property _____

Proposed Use of Property _____

REQUEST: (If there is additional information which you feel would be helpful to the Commission in making a decision, be sure to include this information in your request. If additional space is required to explain your request, please attach the explanation to this application.)

The applicant has prepared this application and certifies that the facts stated herein and exhibits attached hereto are true and correct.

SIGNATURE OF APPLICANT, OWNER OR AGENT _____

NOTE: A PLAT OF THE PROPERTY BEING CONSIDERED NEEDS TO BE ATTACHED TO APPLICATION.

FOR OFFICE USE

Zoning Commission Meeting Date _____ ZONING CHANGE APPROVED NOT APPROVED

ZONING COMMISSION CHAIRMAN _____ DATE OF APPROVAL _____