



No. \_\_\_\_\_

\$ 175.00 FEE

**TEXT AMENDMENT APPLICATION**

**NOTE:** This application shall not be altered by an applicant except that additional sheets may be attached where there is insufficient space provided to complete the required information. Additional supporting material may accompany the application at the applicants discretion. No section of the application can be waived without written justification, and such justification is deemed sufficient to warrant a waiver by the Department of Public Works.

PLEASE TYPE OR PRINT NEATLY

APPLICANT'S NAME: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE:(\_\_\_\_)\_\_\_\_\_

CITY:\_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

What Chapter and Sections of the Zoning Ordinance are proposed to be amended?

\_\_\_\_\_

Write below or attach to this application the proposed text amending the Zoning Ordinance.

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