

Completed by Applicant

Date Submitted	Date of Plan Commission	Signature of Staff Member
-----------------------	--------------------------------	----------------------------------

SUBMITTED: *(To be completed by applicant: Check each individual blank as information is confirmed. If not applicable, mark N/A.)*

- Standard Application and Additional Required Information sheet (Forms 1 and 5)**
- Plat drawn to scale of one (1) inch equals one hundred (100) feet prepared showing all of the following:**

Zoning Map Change:

- Names and addresses of the owner, subdivider and surveyor
- Graphic scale (minimum 1" = 100')
- North arrow
- Area to be rezoned
- Adjacent zoning districts (location and dimensions)
- Location and existing use of all properties within five hundred (500) feet of the area proposed to be rezoned
- Additional information required by the Town Plan Commission or Town Board

Zoning Text Changes:

- Additional information required by the Town Plan Commission or Town Board such as:
 - Existing ordinance language for consideration.
 - Proposed ordinance language for consideration.
 - Explanation of the consistency of this zoning text amendment with the Land Use Plan.

Miscellaneous

- Any other features pertinent to application
- Any other information required by the Town

Architect			
Name			
Company			
Address	City	State	Zip
Daytime Phone ()	Fax ()		
Cell	Email		

Professional Engineer			
Name			
Company			
Address	City	State	Zip
Daytime Phone ()	Fax ()		
Cell	Email		

Registered Surveyor			
Name			
Company			
Address	City	State	Zip
Daytime Phone ()	Fax ()		
Cell	Email		

Contractor			
Name			
Company			
Address	City	State	Zip
Daytime Phone ()	Fax ()		
Cell	Email		