

**PETITION FOR CHANGE OR RELIEF UNDER THE MUNFORD
MUNICIPAL / REGIONAL ZONING ORDINANCE OR MAP**

Check One: Municipal Regional Date: _____

1. Applicant Name _____
Address _____
Telephone No. _____

2. Owner Name _____
Address _____
Telephone No. _____

3. Nature of Petition Rezoning ___ Use on Appeal ___ Variance ___

4. If requesting a Rezoning fill out the following section:

- a. Street Address _____
- b. Tax Map Number _____ Parcel Number _____ Area in Acres _____
- c. Vicinity Roads _____
- d. Present Zoning _____ Requested Zoning _____
- f. Available Utilities Water (yes) (no) Sewer (yes) (no) Electric (yes) (no)
- g. Attach Map of effected property

5. If requesting Use on Appeal or Variance fill out the following section:

(Attach Site Plan of existing or proposed structure for Use on Appeal).

- a. Property address affected _____
- b. Present Zoning _____
- c. Reason for request _____

I hereby certify that the statement made herein by me and the maps or other accompanying data submitted herewith are true and correct. I will be responsible for the fee of this application. Application Fee shall be \$100.00 Dollars.

Fee received by _____

Date: _____

Signature of Applicant