

Town of Archer Lodge Petition for a Zoning Map Amendment

1. Applicant Contact Information

Name Owner/ Applicant:

Address:

Phone Numbers:

Email Address:

Owner's Agent:

Address:

Phone Numbers:

Email:

2. Petition Information

1. Location of subject property:

2. Property size (acres): _____

3. Tax Parcel Number (PIN):

4. Current zoning classification:

5. Current overlay district classification:

6. Requested zoning reclassification of property:

7. Legal description of the property (metes and bounds, or if subdivided, lot block, subdivision plat book and page number). Attach a boundary description map, if requesting rezoning a portion of an unsubdivided tract.

8. Brief explanation of the nature of the request, the reason the petition should be approved, and as statement of how the rezoning is consistent with Town policies and plans.

9. Attach a list of owners names, addresses, and parcel number of adjacent property

10. Read and sign the statement below:

***I certify that I am the owner of the subject property and am the authorized applicant for the change in the Town of Archer Lodge Official Zoning Map.**

Signature:

Date:

3. For Town Use Only

Fee Paid:

Date Application Filed: _____ Case No. _____

Date Public Hearing Scheduled:

Time:

Dates Public Hearing Advertised:

Date Planning Board Meeting:

Case No. _____

Approved: _____

Ordinance No. _____

Denied: _____