

## PLANNING AND ZONING COMMISSION APPLICATION

1.	APPLICANT/OWNER:					
		First Name	Last Name			
	ADDRESS:					
		Street/P.O. Box	Pl	none No		
			~	71 9 1		
		City	State	Zip Code		
2.	PROPERTY DESCI	Email RIPTION:				
		Street Address				
3.	LEGAL DESCRIPT	ION:				
		Parcel Number	Lot(s)	Block(s)		
	Addition					
4.	PRESENT CODES:					
	Code of Ordinance Title					
	APPLICANTS REQUEST FOR AN APPLICATION PERTAINS TO THE FOLLOWING:					
	( ) FOR INTERPRETATION of the meaning or intent of the Zoning Ordinance.					
	( ) A WAIVER from the literal enforcement of the Sub-Division Ordinance.					
	( ) A	CONDITIONAL USE PERMIT				
5.	APPLICANTS REQ	UEST IS AS FOLLOWS:				
	(Attach an additional	sheet if necessary).				
	Signature of Applica	nt	-	Date		
	orginature or reprised			Dute		
	Signature of City Of	figial Daggiyad	-	Date Received by		
	Signature of City Of	nciai Receiveu		Dev. Services Dept.		

## FOR OFFICE USE ONLY

## **CHECKLIST**

		Initial(s)	Date
1.	Application Received:		
2.	Application Reviewed as Follows:		
	a. General Description of Location (Street, address, or "Northwest Corner of Avenue C and Avenue E").		
	b. Legal Description of Property (Lot and Block Number/Metes and bounds, Survey and Abstract).		
	c. Size of Tract by Dimensions and Area. (Shown on Plat drawn to scale).		
	d. Present Zoning Classification		
3.	Applicant's Fee \$received.		
4.	Site Plan Attached.		
5.	Property owners of record within 200 feet notified by mail.		
6.	Notice of public hearing posted.		
7.	Notice of public hearing delivered to newspaper.		
8.	Application reviewed by city officials: (Initial where applicable)		
	a. Community Development Dept.		
	b. Public Works Department		
	c. Fire Department		
	d. Police Department		
	e. Other Departments (Specify)		
9.	Agenda packet mailed to board members.		