

**ZONING CHANGE REQUEST FORM**

Owner Name: \_\_\_\_\_  
(please print clearly)

Owner Address: \_\_\_\_\_

Owner Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

**LOCATION OF PROPERTY REQUESTED FOR RE-ZONING:**

Address: \_\_\_\_\_ Parcel Number: \_\_\_\_\_  
(parcel number is mandatory)

Nearest Major Cross Streets: \_\_\_\_\_

I would request this property be re-zoned to: \_\_\_\_\_

**REASON FOR REQUEST-INTENDED PROPERTY USE:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PROVIDE NAMES AND VALID MAILING ADDRESS FOR ALL PROPERTY OWNERS WITHIN 300' OF SUBJECT PROPERTY. USE ADDITIONAL SHEET IF NECESSARY:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I \_\_\_\_\_, am the owner of this property and I approve of this zoning change request.  
(please print clearly)

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(signature of owner)

( A \$150.00 fee must accompany application. Make checks payable to Town of Snowflake.)