



CITY OF MIDDLEBURG HEIGHTS
APPLICATION FOR ZONING CHANGE

DATE: \_\_\_\_\_

1. NAME OF APPLICANT \_\_\_\_\_

ADDRESS OF APPLICANT \_\_\_\_\_

(In the event applicant is not an individual or a corporation traded on any major stock exchange or over-the-counter market, list herein the beneficial ownership in the event of a trust, the partners in the event of a partnership, or those shareholders holding more than 10% of the stock in the event of a corporation.)

2. NAME OF PROPERTY OWNER \_\_\_\_\_

ADDRESS OF PROPERTY OWNER \_\_\_\_\_

3. PERMANENT PARCEL NUMBER \_\_\_\_\_ SUB-LOT NUMBER \_\_\_\_\_

ADDRESS OF PERMANENT PARCEL NUMBER \_\_\_\_\_

- 4. A legal description of the land involved, including the County Auditor's permanent parcel number and any sub-lot number.
5. Enclose scale drawing(s) showing the dimensions of the land involved, the proposed use, proposed building(s) parking and drives with their relationship to public streets and adjacent land uses.
6. In addition to a hard copy, please submit an electronic copy of the application and all drawings/maps.
7. Give a written description of the present and proposed use of the land and building(s) upon the land to be rezoned.
8. Give a brief request for the action sought of Council (current zoning classification and proposed zoning classification).
9. \$150 application fee must accompany this application.
10. The undersigned applicant acknowledges that he (it) is familiar with the City's zoning code and that he (it) shall be responsible for any representations made in connection with the application for zoning change.

Signature of Applicant

Address of Applicant

Telephone Number of Applicant

Email Address

The undersigned property owner of the land sought to be rezoned by the above application hereby requests and/or consents to the above application for rezoning.

SIGNATURE OF PROPERTY OWNER(S) MUST BE NOTARIZED

SIGNATURE OF PROPERTY OWNER \_\_\_\_\_

ADDRESS OF PROPERTY OWNER/PHONE # \_\_\_\_\_

NAME OF PROPERTY OWNER (PRINT) \_\_\_\_\_

SUBSCRIBED AND SWORN TO BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_, BY \_\_\_\_\_.

(SEAL)



THE MIDDLE OF EVERYTHING!

NOTARY PUBLIC
COMMISSION EXPIRES \_\_\_\_\_