

CITY OF SKIATOOK
APPLICATION FOR REZONING

SKZ-

GENERAL LOCATION:

REQUESTED ZONING:

RECORD OWNER:

PROPOSED USE:

PRESENT USE:

LEGAL DESCRIPTION OF TRACT UNDER APPLICATION: (IF BY METES AND BOUNDS ATTACH PLAT OF SURVEY)

IF APPLICANT IS OTHER THAN OWNER, PLEASE INDICATE INTEREST:

EXAMPLES: PURCHASER, LESEE, AGENT FOR, OR OTHER

ARE THERE ANY PRIVATE OR DEED RESTRICTIONS CONTROLLING USE OF TRACT?

BILL ADVERTISING & SIGN CHARGES TO: NAME:

ADDRESS: PHONE:

I DO HEREBY CERTIFY THAT THE INFORMATION HEREIN SUBMITTED IS COMPLETE, TRUE, AND ACCURATE.

SIGNED: _____ ADDRESS: _____

PHONE: _____

APPLICANT-DO NOT WRITE BELOW THIS LINE

APPLICATION RECEIVED BY: DATE:

TRACT AVERAGE: P.H. DATE:

APPLICATION NO SKZ- SEC. TWP. RG.

PRESENT ZONING: PROPOSED ZONING:

APPLICATION FEE

\$150.00+\$ 50.00 SIGN+ APPLICATION FEE RECEIPT#

\$3.00 mailing per address

CITY COUNCIL ACTION:

SKPC RECOMMENDATION: VOTE:

RECOMMENDATION: DATE: VOTE:

RECOMMENDATION: PROVISIONS:

DATE:

BOARD OF ZONING APPEALS RECOMMENDATION:

RECOMMENDATION: DATE:

SUBDIVISION NAME: ORD. #