APPLICATION NO.:	
APPLICATION FOR ZONING REGULATION CHANGE	
NAME OF APPLICANT:	DATE:
MAILING ADDRESS:	PHONE:
E-MAIL ADDRESS:	
Section to be removed:	
Proposed new section:	
<u> </u>	
(Attach addit	ional sheet if necessary)
	Applicant's Signature
	Company Name (If applicable)
For Official Use Only:	

Date Application Submitted:_____

Filing Fee Paid: