

Application Number: _____

Fee: _____

Receipt #: _____



**TOWN OF MAGGIE VALLEY
APPLICATION FOR REZONING**

Applicant: _____ Owner: _____

Address: _____ Address: _____

Telephone: _____ Telephone: _____

Legal Relationship of Applicant to Property Owner:

Purpose of Request/Proposed Use:

Property Location:

(Street Address)

Parcel Number(s): _____

Lot Size: _____

Current Zoning District: _____ Proposed Zoning District: _____

Current Use: _____

- ATTACH SITE PLAN (show zoning of adjacent properties)
- APPROPRIATE FEE MUST ACCOMPANY ALL APPLICATIONS
- ATTENDANCE or REPRESENTATIVE IS REQUIRED AT ALL BOARD MEETINGS

Signature of Applicant

Date