



Town of Maggie Valley
3987 Soco Road
Maggie Valley, NC 28751
828-926-0866

APPLICATION FOR ZONING MAP AMENDMENT

FEE: _____

Date of Application: _____
Property Address: _____
Parcel Number: _____
Current District : _____
Proposed District: _____

Is the request for the entire parcel: Yes _____ No _____
- If no, attach a plat of subject area from a licensed land surveyor

Owner(s): _____

Mailing Address: _____

Telephone: _____ email: _____

Applicant(s) (if different than owner): _____

Mailing Address: _____

Telephone: _____ email: _____

Applicant/Owner Signature

Applicant/Owner Signature

Staff Representative Signature

Notarial Certification

_____ County, North Carolina

I certify that _____ personally appeared before me this the
____ day of _____,
and acknowledged the due execution of the foregoing instrument.

Notary Signature: _____

Notary Printed Name _____

My Commission Expires: _____

(Seal)



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APPLICATION FOR ZONING MAP AMENDMENT

Owner Signature

(complete one for each owner)

I, _____, **owner (trustee, executor, etc.)** of the property denoted by Haywood County Tax PIN _____, request that the property be granted a rezoning from _____ to _____.

I agree with the conditions requested and understand that additional conditions may be applied by the governing body. Also, I understand that if granted, the rezoning is permanent and will run with the land. I feel this will serve my best interests.

 Signature

 Date

 Mailing Address

 City, State, Zip

 Phone Number

 Staff Signature

Notarial Certification

<p>_____ County, North Carolina</p> <p>I certify that _____ personally appeared before me this the ____ day of _____, _____, and acknowledged the due execution of the foregoing instrument.</p> <p>Notary Signature: _____</p> <p>Notary Printed Name _____</p> <p>My Commission Expires: _____ (Seal)</p>
