

OFFICE	USE ONLY `
Date received:	Fee: \$
P&Z Public Hearing date:	
Date to send cert. letters:	
Date to publish:	
Proof of taxes paid:	date verified:

## VILLAGE OF JONES CREEK RE-ZONE/RE-PLAT APPLICATION

Name(s) of Proper	rty Owner:							
Current Address: _		Email:						
City:		State: _		Zi	p:			
Home Phone:	Busin	ness Phone:		Cell:				
Name of Applican	t:							
		(If different than Property Owner)						
Address:		Email:						
City		State		Zi	Zip:			
City		State		:Cell:				
Home Phone:	Busing Bu	ness Phone:		Cell:				
Home Phone:	Busin of Property to be I	ness Phone: Re-zoned/Re-pl		Cell:				
Home Phone:	Busir	ness Phone: Re-zoned/Re-pl		Cell:				
Home Phone: Address/Location  Legal Description:	Busir of Property to be I	ness Phone: Re-zoned/Re-pl	at:	Cell:				
Home Phone:Address/Location  Legal Description:  ATTACH MAP/S	Busin  of Property to be I  Metes & Bounds  URVEY OF PROF	ness Phone: Re-zoned/Re-pl	at:	Cell:Block				
Home Phone:Address/Location  Legal Description:  ATTACH MAP/S   Has the property be	Busin  of Property to be I  Metes & Bounds  URVEY OF PROF	ress Phone: Re-zoned/Re-pl  Control  PERTY  YES	at:	Cell:Block	Subdivision			

Application Fee will be determined by City Secretary/Administrator (must be submitted with application)