

WILDER, KY PLANNING AND ZONING COMMISSION

APPLICATION FOR ZONING ACTION

I/We, the undersigned, hereby apply for the following indicated zoning action:

- | | |
|--|--|
| <input type="checkbox"/> Zoning Regulation Text Amendment | <input type="checkbox"/> Zoning Map Amendment (Zone Change) |
| <input type="checkbox"/> Comprehensive Plan Text Amendment | <input type="checkbox"/> Subdivision Regulation Text Amendment |
| <input type="checkbox"/> Preliminary Plat Approval | <input type="checkbox"/> Improvement Plan Approval |
| <input type="checkbox"/> Final Subdivision Plat Approval | <input type="checkbox"/> Identification (deed) Plat Approval |
| <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Site Plan Review & Approval |
| <input type="checkbox"/> Concept Development Plan Change | <input type="checkbox"/> Preliminary Development Plan Approval |
| <input type="checkbox"/> Change of Non-Conforming Use | <input type="checkbox"/> Dimensional Variance |
| <input type="checkbox"/> Appeal to Board of Adjustments | <input type="checkbox"/> Certificate of Occupancy |
| <input type="checkbox"/> Revisions | |

Applicant: _____ Owner or Agent
 Address: _____ Phone: _____
 City, State, Zip _____ Other Phone _____

Name of Property Owner _____ Phone: _____
 Address: _____ City & State _____
 Location of Property: _____

Present Zoning Classification: _____ Map Page No.: _____
 Deed Book; _____ Page: _____ Group: _____
 Recorded at: Alexandria Newport Land Area in Acres: _____
 Description of Action Requested: _____

Subscribed and Sworn to before me this _____ day of _____ 20_____.

Notary Public

My Commission Expires _____

Owner's Signature

Applicant's Signature

FOR COMMISSION USE ONLY

CASE NO: _____ FEE AMOUNT: \$ _____ DATE RECEIVED: _____ CHECK NO: _____
 Referred to: _____ Hearing Date: _____
 Action Taken: _____ Date of Action: _____
 Referred to: _____ Hearing Date: _____
 Action Taken: _____ Date of Action: _____