

City of Plymouth
Plan Commission

Application for
Zoning Map Amendment

Application Requirements

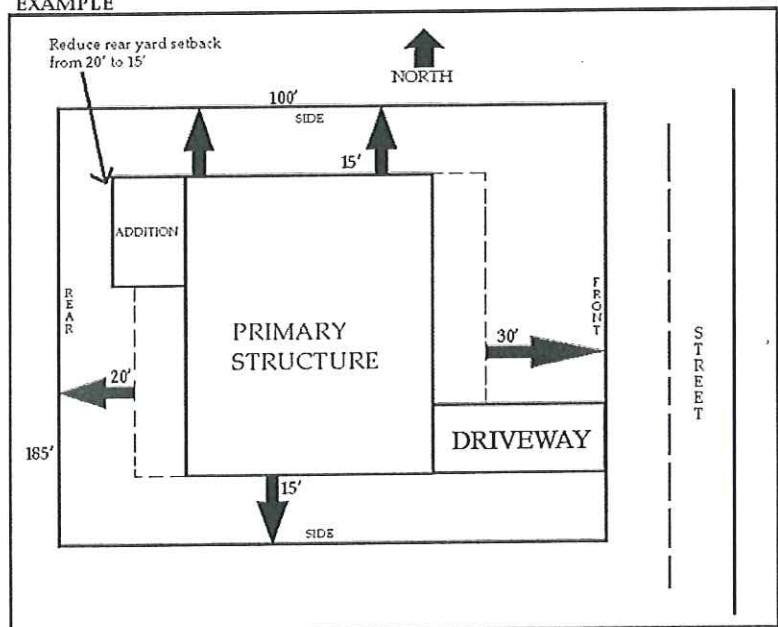
1. This completed application;
2. A site plan showing the property;
3. A complete legal description of the subject property;
4. The names, addresses, and mailing addresses of interested parties who own property within three hundred feet (300') of the subject property. This information may be obtained from the Marshall County Auditor's Office; and
5. A filing fee payable to the City of Plymouth, for advertising and handling costs of the application.

Site Plan Requirements

These features must be shown on the site plan

1. All existing and proposed structures;
2. Entire lot dimensions;
3. Arrow showing North;
4. All adjacent street(s);
5. Access (i.e. driveway) and parking;
6. Distances from structures to property lines;
7. Distance between structures;
8. Label property lines;
9. Show all recorded easements;
10. Show septic field

EXAMPLE



Application Information

Case Number: _____

Date: _____

Property Address: _____

Property Owner: _____

Mailing Address: _____

Phone: _____ Fax: _____

E-mail: _____

Applicant: _____

Mailing Address: _____

Phone: _____ Fax: _____

E-mail: _____

Developer: _____

Mailing Address: _____

Phone: _____ Fax: _____

E-mail: _____

Plan Preparer: _____

Mailing Address: _____

Phone: _____ Fax: _____

E-mail: _____

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Residential Development

How many residential units are being requested?

Single-Family: _____ Two-Family: _____ Multi-Family: _____ TOTAL: _____

Commercial/Institutional/Industrial Development

Indicate the type of commercial/institutional and/or industrial development proposed.

Indicate the gross and leasable square footage for each type of development.

Justification for Request

On a separate piece of paper, please describe your proposed project, and provide a justification for the Amendment to the Zoning Map (rezone)

I hereby certify that the above information and accompanying documents are true and accurate to the best of my knowledge. I understand that any misrepresentations of submitted data may invalidate any approval of this variance.

LEGAL OWNER _____ DATE _____

APPLICANT _____ DATE _____