

City of Plymouth  
Plan Commission

Application for  
Zoning Map Amendment

**Application Requirements**

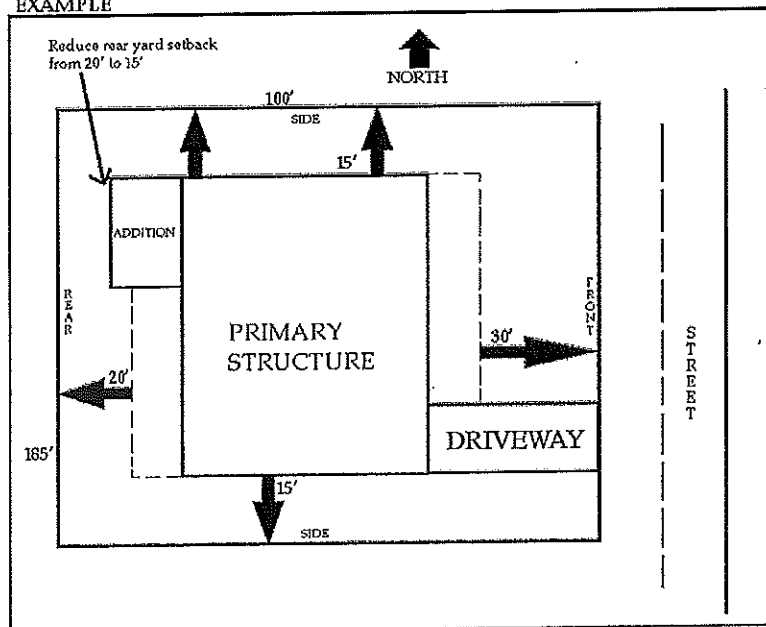
1. This completed application;
2. A site plan showing the property;
3. A complete legal description of the subject property;
4. The names, addresses, and mailing addresses of interested parties who own property within three hundred feet (300') of the subject property. This information may be obtained 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.

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

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**Justification for Request**

*Please include current requested zoning*

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 \_\_\_\_\_