

LAND USE APPLICATION

I. Application is made for:

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|---|--|
| <input type="checkbox"/> Administrative Plat (AP__-__) (\$_____) | <input type="checkbox"/> Annexation (AX__-__) (\$_____) |
| <input type="checkbox"/> Conditional Use (CU__-__) (\$_____) | <input type="checkbox"/> Final Plat (FP__-__) (\$_____) |
| <input type="checkbox"/> Historic Designation (HD__-__) (\$_____) | <input type="checkbox"/> Historic Renovation (HR__-__) (\$_____) |
| <input type="checkbox"/> Minor Subdivision (MS__-__) (\$_____) | <input type="checkbox"/> Preliminary Plat (PP__-__)(\$_____) |
| <input type="checkbox"/> Rezoning (RZ__-__) (\$_____) | <input type="checkbox"/> Site Plan (ST__-__) (\$_____) |
| <input type="checkbox"/> Sketch Plan (SP__-__) (\$_____) | <input type="checkbox"/> Variance (VC__-__) (\$_____) |

II. Project Name: _____

- Signed Fee Agreement; CK#: _____; Amt: \$_____

III. Contact information: *(please attach any additional contacts)*

Owner: _____	Telephone: _____
Address: _____	Fax: _____
_____	E-mail: _____
Applicant: _____	Telephone: _____
Address: _____	Fax: _____
_____	E-mail: _____

IV. Property Description:

Address or Location: _____

Existing Zoning: _____ Existing Use: _____

Proposed Zoning: _____ Proposed Use: _____

V. Purpose of Application: *(please attach any additional information)*

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VI. Certification: *Must be signed with **BLUE INK**.*

OWNER CERTIFICATION OF COMPLETED APPLICATION

Signed: _____ Date: _____

APPLICANT CERTIFICATION OF COMPLETED APPLICATION

I certify that the information and attachments I have submitted are true and correct to the best of my knowledge. In filing this application, I am acting with the knowledge and consent of the property owners. I understand that all materials and fees required by the Town of Timnath must be submitted prior to having this application processed.

Signed: _____ Date: _____

Applicant, please do not write below this line.

Fee(s) Paid:		Date:		Check #:		Received By:	
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