HURON COUNTY PLANNING COMMISSION
REQUEST FOR ZONING CLASSIFICATION CHANGE

$400.00 Application Fee at Regular Monthly Meeting
$600.00 for Special Meeting

CASE NO.: ZA- _____ **DATE:** _____

APPLICANT'S NAME: _____

ADDRESS: _____
(mailing street address) city state zip telephone

PROPERTY OWNER'S NAME AND ADDRESS (if different than above):

_____
name

_____
street address city state zip telephone

ADDRESS OF PROPERTY REQUESTED FOR REZONING: _____

PROPERTY IDENTIFICATION NO.: _____

LEGAL DESCRIPTION OF PROPERTY:

_____
_____
_____
_____

RECLASSIFICATION REQUEST: This request is to change the zoning classification of the above property

FROM _____ **TO** _____
present classification proposed classification

The above information is true and accurate. This application must be returned with the filing fee to the Huron County Building & Zoning Office before a Planning Commission public hearing can be scheduled. Contact the Building & Zoning Office at (989) 269-9269 regarding information about present zoning and proposed use of this property before submitting this application.

_____ _____
Signature of Applicant Date

By signing this application, owner/agent is granting County officials the right to on-site inspection of property involved in this request.