

DATE _____

APPLICATION TO REZONE

TO THE PLANNING COMMISSION AND THE BOARD OF SUPERVISORS
MECKLENBURG COUNTY, VA

FEE: \$325.00 (MADE PAYABLE TO MECKLENBURG COUNTY)

Mail to: Director of Planning and Zoning, P O Box 307, Boydton, VA 23917

I (We), the undersigned, do hereby respectfully make application and petition the Governing Body to amend the Zoning Ordinance and to change the zoning Map of Mecklenburg County, VA as hereinafter requested, and in support of this application, the following facts are shown:

1. The property sought to be rezoned is located at:

The tax map number for the parcel: _____

Located in Magisterial District: _____

2. The property sought to be rezoned is owned by: _____

as recorded in Deed Book _____, Page _____.

3. It is desired and requested that the foregoing property be rezoned:

FROM

TO

4. It is proposed that the property will be put to the following use:

5. It is proposed that the following buildings will be constructed:

6. Attached is a copy of a Vicinity Map.

SIGNATURE OF APPLICANT OR OWNER: _____

PRINTED NAME OF APPLICANT/OWNER: _____

ADDRESS: _____

TELEPHONE: _____

(over)

7. The following are all individuals, firms or corporations owning property adjacent to all side, rear and in front (across the street) of the property sought to be rezoned:

- (a) _____
- (b) _____
- (c) _____
- (d) _____
- (e) _____
- (f) _____
- (g) _____

(If more space is needed for the listing of adjoining property owners, add a continuation sheet.)

TO THE BOARD OF SUPERVISORS, MECKLENBURG COUNTY, VA

The following is the recommendation of the Mecklenburg County Planning Commission on the rezoning at a public hearing held on:

ACTION TAKEN BY THE BOARD OF SUPERVISORS

A public hearing was held on _____; the Board of Supervisors took the following action on the rezoning petition:
