

# TOWN OF MITCHELL

## REZONING/LAND DIVISION APPLICATION

Applications are due 30 days prior to the Plan Commission meeting date on which they will be placed on the agenda. The Clerk will not accept incomplete applications. No hearing will be scheduled unless all required information is attached – no exceptions. Additional information may be requested by the Town of Mitchell’s Town Board and/or Plan Commission. Application fee: \$150.00

Date: \_\_\_\_\_

1. Name of property owner: \_\_\_\_\_
2. Owner’s address: \_\_\_\_\_
3. Owner’s phone number: \_\_\_\_\_
4. Name of applicant (if different than owner) : \_\_\_\_\_
5. Applicant’s address: \_\_\_\_\_
6. Applicant’s phone number: \_\_\_\_\_
7. Address/location of property: \_\_\_\_\_
8. Tax parcel number: \_\_\_\_\_
9. Existing zoning of the property: \_\_\_\_\_
10. Proposed zoning of the property: \_\_\_\_\_
11. Adjacent use:

	Use
North	
South	
East	
West	

12. Proposed use/development of property: \_\_\_\_\_  
\_\_\_\_\_

13. Frontage width of parcel: \_\_\_\_\_

14. Current size of parcel: \_\_\_\_\_

15. Proposed number of parcel and parcel sizes: \_\_\_\_\_  
\_\_\_\_\_

16. Attach drawing or sketch of property (show location, dimensions, existing uses, and buildings, all drawn to scale.)

17. A certified survey map is required if parcel to be rezoned is being split from a larger parcel

I/We hereby certify that all the above statements and attachments submitted hereto are true and correct to the best of my/our knowledge and belief.

Signature of petitioner: \_\_\_\_\_

Signature of petitioner: \_\_\_\_\_