

CITY OF CHISHOLM
BUILDING OFFICIAL
PLANNING COMMISSION

FILE NUMBER _____
FEE PAID _____
DATE FILED _____

APPLICATION FOR CONSIDERATION OF PLANNING REQUEST

STREET LOCATION OF PROPERTY: _____

LEGAL DESCRIPTION OF PROPERTY: _____

OWNER: NAME _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

APPLICANT (If other than owner)

NAME _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TYPE OF REQUEST: (Fee \$125 - Not Refundable)

CONDITIONAL USE PERMIT _____ VARIANCE _____

AMENDMENT _____ ZONING _____ OTHER _____

DESCRIPTION OF REQUEST _____

REASON FOR REQUEST _____

PRESENT ZONING CLASSIFICATION: _____

EXISTING USE OF THE PROPERTY: _____

Has a planning request on the subject site or any part thereof been previously sought?

Yes _____ No _____ When? _____

Signature of Applicant: _____ Date: _____

OFFICIAL USE ONLY – DO NOT FILL OUT THIS PART OF THE FORM			
Approved _____	Denied _____	by the Planning Commission on Date: _____	
Approved _____	Denied _____	by the City Council on Date: _____	