



REZONING REQUEST

DATE FILED: _____ FEE PAID: \$ _____
 NAME OF APPLICANT: _____

PROPERTY INFORMATION	
Address: (Street Name) _____ (Street Number) _____	
General Location: _____	
Description: Parcel(s) _____ Town Blocks _____	
Other _____	
Size of Tract _____ Acres _____ Square Feet _____	
CHANGE REQUESTED:	APPLICANT'S PROPOSED PROPERTY USE:
<p>I (we) request that the Jonesborough Regional Planning Commission, recommend and amendment to the official zoning map to change the zoning of the property described above.</p> <p>From (Current Zoning) : _____</p> <p>To (Requested Zoning): _____</p> <p>Previous Zoning Requests: _____</p>	<p>(Be Specific) _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Density Proposed: _____</p> <p>Dwelling Units per Acre: _____</p> <p>Existing Land Use(s): _____</p> <p>_____</p> <p>_____</p> <p>_____</p>
ALL CORRESPONDENCE RELATING TO THIS APPLICATION SHOULD BE MAILED TO:	
Name: (PRINT) _____ Address • City • State • Zip _____ Telephone _____	
AUTHORIZATION OF APPLICATION:	
I hereby certify that I am the authorized applicant, representing ALL property owners involved in this request or holders of option on same, as listed on the back of this form.	
Signature: _____ Name: (Print) _____	
Address • City • State • Zip _____ Telephone _____	
APPLICATION ACCEPTED BY: _____ DATE: _____	