

FY2013 –
Petition #: _____

Date Originally Filed: _____

Date Amended: _____

Received By: _____

AMENDED
REZONING APPLICATION
CITY OF CHARLOTTE

Complete all fields –

Property Owner: _____

Owner's Address: _____ City, State, Zip: _____

Date Property Acquired: _____ Utilities Provided: (Water) _____ (Sewer) _____
(CMUD, Private, Other) (CMUD, Private, Other)

LOCATION OF PROPERTY (Address or Description): _____

Tax Parcel Number(s): _____

Current Land Use: _____

Size (Sq.Ft. or Acres): _____

Existing Zoning: _____ Proposed Zoning: _____

AMENDED REQUEST DETAILS:

Purposes: 1) Original Request 2) Amendment/Change:

Name of Agent

Name of Petitioner(s)

Agent's Address

Address of Petitioner(s)

City, State, Zip

City, State, Zip

Telephone Number Fax Number

Telephone Number Fax Number

E-Mail Address

E-Mail Address

Signature of Property Owner if other than Petitioner

Signature

(Name Typed/Printed)

(Name Typed/Printed)