

CITY OF PELHAM

APPLICATION FOR REZONING, CONDITIONAL USE, VARIANCE OR SPECIAL REVIEW

Date: _____

Name of applicant: _____ Daytime phone: () _____

Address: _____ City: _____ State: ___ Zip: _____

In order that the general health, safety and welfare of the citizens of the City of Pelham may be preserved, and substantial justice maintained, I (We) the undersigned respectfully request in connection with the property hereinafter described:

___ Rezoning from _____ classification to _____ classification

___ Conditional Use

___ A variance from the terms of the Zoning Ordinance

___ Special Review

The subject property is described as follows (attach plat or legal description): _____

The property is presently used for: _____

Has this property ever been requested to be rezoned? ___ Yes ___ No. If yes, when and what action was taken? _____

Zoning Change/Conditional Use

Give a brief explanation of why applicant is requesting a zoning change, be specific: _____

Variance

If requesting a variance, describe the unusual conditions of the property pertaining to size, shape, location or topography which justify the variance. _____

