

CORYDON PLANNING & ZONING COMMISSION

219 NORTH CAPITOL AVENUE
CORYDON, IN 47112
812-738-3958

APPLICATION FOR A ZONING CHANGE

Petitioner, _____ of _____

Represents to the Town of Corydon Planning & Zoning Commission of Corydon, Indiana, that

_____ is the owner of record of property located at

The petitioner hereby requests the zoning be changed from _____ to _____.

The reason for this request is _____

The petitioner declares that he / she is the owner of record and owns 50% or more of the real estate described in this petition. A copy of the deed with the description of real estate accompanies this petition.

Owner / Petitioner: (Print Name) _____

Owner / Petitioner: (Signature) _____

Address: _____

Phone Number: _____

Email: _____

Date: _____