

VILLAGE OF MIDDLEVILLE PETITION TO REZONE LAND



Project # RZ- _____

Hearing Date _____

Name of Applicant _____

Address of Applicant _____

Phone No. of Applicant _____

Name of Property Owner, if not Applicant _____

Address of Property Requested to be Rezoned _____

Permanent Parcel No. of Subject Property: 08-41 _____

Legal Description _____

Current Zoning _____

Proposed Zoning _____

Interest of Applicant in Subject Property _____

Applicant's Reasons for Requesting a Rezoning _____

For Office Use Only

Filing Fee \$ _____

Filing Date ____ / ____ / ____

Signature of Applicant _____

Received By _____