CATOOSA COUNTY PLANNING COMMISSION APPLICATION FOR ZONING AMENDMENT

THE APPLICATION FEE MUST ACCOMPANY THIS APPLICATION

CASE#	RECEIPT#		APPLICATION FEE	
			I	
PLANNING COMMISSION HEA	ARING:			
CATOOSA COUNTY GOVERNMENT BUILDING		DATE:	TIME:	P.M.
FINAL ACTION BY THE BOARD OF COMMISSIONERS:				
PUBLIC MEETING ROOM				
CATOOSA COUNTY GOVERN	MENT BUILDING ON	DATE:	TIME:	P.M.
OWNER'S NAME		MAIL	ING ADDRESS	
CITY/STATE/ZIP		PHON	NE	
		TOO		
TAX PARCEL#		LOCA	ATION ADDRESS	
CURRENT ZONING		DEOI	TESTED ZONING	
CUKKENI ZUNING		REQU	JESTED ZONING	

REASON FOR CHANGE:

DOES THIS REQUEST INVOLVE A HALFWAY HOUSE, DRUG REHABILITATION CENTER, OR OTHER FACILITY FOR TREATMENT OF DRUG DEPENDENCY? YES_____ NO_____

I SWEAR UNDER PENALTY OF LAW THAT THE WITHIN INFORMATION IS TRUE, CORRECT, AND COMPLETE OWNER'S SIGNATURE DATE

PLANNING COMMISSION DECISION/DATE	COMMISSION DECISION/DATE

A YELLOW SIGN, FURNISHED BY THE PLANNING COMMISSION, WILL BE POSTED ON THE SUBJECT PROPERTY AT LEAST 15 DAYS PRIOR TO THE ABOVE MEETING DATE.

THIS APPLICATION MUST BE FULLY COMPLETE AND FILED AT THE ZONING OFFICE BY THE DESIGNATED CUT OFF DATE TO BE HEARD BY THE PLANNING COMMISSION ON THE FOURTH TUESDAY OF THE MONTH. THE PLANNING COMMISSION DECISION IN A RE-ZONING MATTER WILL BE A RECOMMENDATION TO THE BOARD OF COMMISSIONERS WHO WILL MAKE THE FINAL DECISION ON THE THIRD TUESDAY OF THE FOLLOWING MONTH.

ANY APPLICANT MAKING POLITICAL CONTRIBUTIONS TOTALING \$250 OR MORE WITHIN THE LAST TWO YEARS TO ANY MEMBER OF THE BOARD OF COMMISSIONERS MUST DISCLOSE SAME.

WITHDRAWALS PRIOR TO A HEARING MUST BE MADE IN WRITING BY THE APPLICANT.