Town of Richlands Zoning Change & Appeal Form

<u>APPLICANT</u> : (Please Print)	
NAME:	PHONE NO:
MAILING ADDRESS:	
ADDRESS OF PROPERTY (if different from mailing add	ress):
PROPERTY OWNER (if different from applicant): (Plea:	se Print)
,	PHONE NO:
A CONTRACT PROPERTY (CIT. 1.0.)	
ACTION REQUESTED (Check One):	
() ZONING ORDINANCE TEXT AMENDMENT () ZONING MAP AMENDMENT	(Required Fee: \$250.00) (Required Fee: \$450.00
() VARIANCE REQUEST	(Required Fee: \$250.00)
() CONDITIONAL/SPECIAL USE PERMIT () APPEAL OF ADMINISTRATIVE DECISION	(Required Fee: \$250.00) (Required Fee: \$50.00)
() OTHER	(Required Fee: \$30.00)
DESCRIPTION OF REQUEST:	
OWNER/APPLICANT STATEMENT: I certify that I at	m the property owner or truly represent the property owner(s). I understand that each
	esting a variance or conditional use permit, or requesting a rezoning or other change to see to cover the costs of advertising and administration. The fees required are adopted by
	dule for the Town of Richlands. A receipt of this fee shall be issued by the Town. This
fee, however, shall not apply to requests originating with any	
SIGNATURE OF APPLICANT:	DATE:
SIGNATURE OF ATTEICANT.	DATE.
*	*OFFICIAL USE ONLY**
ZONING OFFICIAL SIGNATURE:	
DATE REQUEST RECEIVED:	
HAS APPROPRIATE FEE BEEN COLLECTED IF REQUI	
THE THINGS AND THE TELEPOOL OF	ND. 125 NO
PLANNING BOARD / BOARD OF ADJUSTMENT ACT	TION: APPROVE() DENV()
LANNING BOARD / BOARD OF ADJUSTMENT ACT	MON. MIROVE() DENI()
SIGNATURE OF ZONING BOARD CHAIR:	DATE: