

APPLICATION FOR ZONING MAP AMENDMENT (REZONING)

Director of Public Service publicservice@wilmingtonoh.org

TO: THE CITY COUNCIL OF WILMINGTON, OHIO

Application is hereby made by the undersigned for the following map amendment (rezoning):											
1. PARCEL/PROPERTY INFORMATION											
Parcel ID Property Address											
2. PROPERTY OWNER INFORMATION											
Owner Name											
Street A	ddress				1						
City						State			Zip		
Phone			Cell			Email					
3. AGENT/APPLICANT INFORMATION											
Agent/A	pplican	t Name									
Street A	ddress								T		
City			1	T		State			Zip		
Phone			Cell			Email					
4. ZONI				E REQUEST IN	FORM	MATION					
Current Zoning Classification FROM: (Check One)					TO:	Proposed Zoning Classification (Check One)					
	LI – Light Industrial LI – Light Indu				ustrial						
GI – General Industrial							GI – General Industrial				
	SC – Suburban Commercial							SC – Suburban Commercial			
DC — Downtown Core								DC – Downtown Core			
DT — Downtown Transition								DT — Downtown Transition			
	MF –	F – Multi-Family MF – Multi-Family									
	MH –	Mobile Ho	me Park	e Park MH — Mobile Home Park							
	RR –	Rural Resid	lential		MH — Mobile Home Park RR — Rural Residential SN — Suburban Neighborhood						
	RR — Rural Residential SN — Suburban Neighborhood							SN – Suburban Neighborhood			
TN — Traditional Neighborhood						TN – Traditional Neighborhood					
5. FUL	L LEGA	L DESCRIP	TION OF	PROPERTY (Ir	nclud	ing acrea	age)		Le	egal Description Attached	
6 PI A	T OR SI	IRVFY MA	P OF SA	ID REAL PROPI	FRTY	,			Pla	t or Survey Map Attached	
6. PLAT OR SURVEY MAP OF SAID REAL PROPERTY Plat or Survey Map Attached											
7. PROPOSED USE OF SITE											

said property sought to be rezoned.	You must obtain this inform	adjacent to or directly across the street from ation from the current tax duplicate of the
Clinton County Auditor. (Attach ad Parcel # Owner N		Additional Sheets Attached Owner Address
Farcer# Owner is	varrie	Owner Address
I		
Applicant will also be billed for lega	al notice to the newspaper an	d postage fees for notification to adjacent
property owners by certified mail.		
(Signature of Owner)		(Date)
		- -
(Signature of Applicant, (if different	from owner)	(Date)
Please submit your application to:		
City of Wilmington Director of Public Service Office		
69 N. South Street		
Wilmington, Ohio 45177		
publicservice@wilmingtonoh.org		
NOTE: APPLICATIONS RECEIVED	PAST SUBMITTAL DEADLIN	IE WILL NOT BE CONSIDERED UNTIL THE NEXT
	IONS THAT ARE NOT COMP	PLETE <u>WILL NOT</u> BE PROCESSED UNTIL ALL
INFORMATION IS RECEIVED.		
	(FOR OFFICIAL USE	ONLY)
Data Application on Dispusion Comme	destar America	
Date Application on Planning Comm	ilssion Agenda	
Planning Commission Action:	Recommended A	
	Recommended D	visapproval
Referred to City Council for Action		
	Date	
	(Signature) — Clerk — City (Council ————————————————————————————————————