

# Clay County Rezoning Petition



Date		File Number	
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Application Fee - \$150

**Applicant is:**

Section 1: Applicant/Owner/Contact Information			
	Applicant	Owner	Contractor
Name			
Address			
Phone			
E-mail			

Section 2: Property Information	
Street Address	
Short Legal Description	
Parcel ID	

Section 3: Zoning District/Land Use of Adjacent Property			
	North		East
	South		West

Local Water contacted

Local Energy contacted

Section 4 Reason for Rezoning Petition

Be as specific as possible about the property and reason for rezoning. I, the undersigned, do hereby affirm: the above statements are true and correct and agree to comply with the provisions of the regulations of Clay County.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date