

Permit Number: \_\_\_\_\_

Permit Issue Date: \_\_\_\_\_

## Greenville Township Change of Zoning Application Form

1. Property Location: \_\_\_\_\_

Lot No: \_\_\_\_\_ Plat: \_\_\_\_\_ Parcel ID#: \_\_\_\_\_

2. Name of Property Owner: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

3. Occupant: \_\_\_\_\_

4. Name of Contractor: \_\_\_\_\_

Address: \_\_\_\_\_

5. Proposed Type of Use: \_\_\_\_\_

Residential

Office

Commercial

Industrial

Other (specify) \_\_\_\_\_

6. A plot plan (drawn to scale) must be submitted showing the actual lot dimensions (including easements), the exact size and location of all buildings on the lot, proposed new construction, and indicate the existing and intended use of all land buildings.

a) Lot Size: Area: \_\_\_\_\_ sq. ft. Frontage: \_\_\_\_\_ ft. Lot Depth: \_\_\_\_\_ ft.

b) Building Size: First Floor: \_\_\_\_\_ sq. ft. Total: \_\_\_\_\_ sq. ft.

c) Building Height (above established grade): \_\_\_\_\_ ft.

d) Valuation: \$ \_\_\_\_\_

e) Flood Plan?      Yes                      No

I hereby swear that the information and statements given on this application are true and correct to the best of my knowledge. I understand that if the information in this application is not correct or complete, the result may be the invalidation of this and all subsequent permit(s) issued in conjunction with this Zoning Certificate.

Date Filed: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\*\*\*OFFICE USE ON BACK\*\*\*

Permit Number: \_\_\_\_\_

Permit Issue Date: \_\_\_\_\_

Section: \_\_\_\_\_

Town: \_\_\_\_\_

Range: \_\_\_\_\_

Parcel ID Number: \_\_\_\_\_

Zoning District Classification: \_\_\_\_\_

Permit Fee: \$ \_\_\_\_\_

Article: \_\_\_\_\_

Section: \_\_\_\_\_

Use: Conforming

Nonconforming

Special, see Board of Zoning Appeals Case Number: BZA \_\_\_\_\_

Approved

Conditionally Approved

Disapproved

(If application is Conditionally Approved or Disapproved, see remarks or attached comments for explanation.)

Remarks/Restrictions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Authorizing Official

\_\_\_\_\_  
Date