



Date: _____

Application Number: _____

Review Fee: \$ _____

VILLAGE OF LAKEVIEW REZONING APPLICATION

Applicant Information

Name: _____

Street Address: _____

City: _____ Zip: _____ Phone: _____ E-Mail: _____

Property Owner (if different from applicant; if more than 1 list on separate sheet)

Name: _____

Street Address: _____

City: _____ Zip: _____ Phone: _____ E-Mail: _____

Property for which the Rezoning is requested

Street Address: _____

Tax Parcel ID#: _____ Zoning District: _____

Requesting rezoning from _____ to _____

(Current zoning classification) (Requested zoning classification)

Proposed Use (If known):

Is the request for a conditional rezoning:

Yes No

If yes, please list conditions (Attached additional pages if necessary):

Please indicate how the above requests complies with the following standards:

The requested amendment is consistent with the village master plan or that a mistake in the plan, or changes in conditions or village policy have occurred that are relevant to the request. (Attached additional pages if necessary)

The property cannot be reasonably used as it is currently zoned, and the proposed request represents the most suitable alternative zoning classification based on the master plan. (Attached additional pages if necessary)

Attach a map at a scale of not less than 1"=50' showing the subject parcel in relation to adjoining parcels of land

I hereby affirm that the above information is correct to the best of my knowledge.

Signature of Applicant **Print/type name** **Date**

Signature of Property Owner _____ Print/type name _____ Date _____
(if different from applicant)

(See reverse)

FOR OFFICE USE ONLY

_____ Date notice of Planning Commission meeting published.

Date notice of Planning Commission meeting mailed to residents and property owners within 300' of subject parcel.

Attach copy of published notice and list of property owners sent notice.

Planning Commission Recommendation

Recommend approval Recommend denial Recommend approval w/changes

Date of Planning Commission meeting (minutes attached): _____

Village Council Decision

Approval Denial Approval w/changes approved by applicant

Date of Village Council approval meeting (minutes attached):

Remarks: