



REZONE APPLICATION
Sheridan, Indiana

APPLICATION FOR REZONE
FROM THE REQUIREMENTS OF THE MASTER PLAN
PERMANENT ZONING ORDINANCE
DOCKET NUMBER:
HEARING DATE:

Existing Zone District Docket NO. Hearing Date
Proposed Zone District Reviewed By Decision Date
Size of Area Rezone Date

Project Address / Location

Owner Name Phone:

Address

Applicant Name Phone:

Address

Contact Person Phone:

Address

Reason for rezone request:

Proposed use of rezoned property:

Is rezone request in compliance with Comprehensive Plan? Yes No

Offered conditions if rezone is approved:

Must Have Attached

- Site location map/legal description or survey
List of affected adjacent property owners approved by Title Company (one property deep)
Supporting information
Complete finding of facts (11 copies)

Property Owner Signature

Applicant Signature

Attorney

Contact Person

Date

# NOTICE OF PUBLIC HEARING

**DOCKET NO.** \_\_\_\_\_

The Sheridan Plan Commission will hold a public hearing on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, at the Sheridan Town Hall, 506 S. Main Street, at \_\_\_\_\_ p.m.

The Application submitted by \_\_\_\_\_ requests that a

\_\_\_\_\_ Be granted for the property located at \_\_\_\_\_.

The Plan Commission would certify to the Sheridan Town Council with a favorable recommendation, with an unfavorable recommendation, or with no recommendation. Interested persons may file written suggestions or objections concerning the request with the Sheridan Plan Commission located at Sheridan Town Hall, 506 S. Main Street, Sheridan, IN 46069 and/or they may contact the commission at 317-758-5293 for assistance. Interested persons will be given the opportunity to be heard by the Sheridan Plan Commission at the above specified time and place.

\_\_\_\_\_

Petitioner name and contact information