

ZONING PERMIT APPLICATION
FRANKLIN TOWNSHIP, MERCER COUNTY
ZONING CHANGE OR AMENDMENT

Date Filed: _____
Current Zoning District: _____
Proposed Zoning District: _____
Fee Paid: _____

Map Change: _____ Text Change: _____

Applicant's Name: _____

Applicant's Address: _____

Applicant's Phone: _____

Location of Property to be Changed: _____

For your Application to be considered complete, the following must be attached:

- A survey and legal description of the property to be rezoned.
- A vicinity map at a scale of not less than 1" / 100' showing:
 - a. Property lines
 - b. Streets
 - c. Placement of all buildings on the property
 - d. Principal use of all properties within 300 feet of the property proposed to be rezoned.
 - e. The designation of all property lines of each individual lot (where applicable).
 - f. Other: _____

**DIRECTIONS TO THE PROPERTY, FROM THE NEAREST
HIGHWAY, MUST BE PROVIDED.**

The Applicant hereby certifies that all the information on, and attached to, this application is true and correct.

Applicant or Applicant's Agent: _____

SIGNATURE