

Case Number:_____
Date Filed:_____
124 N Michigan Street
Plymouth, IN 46563

PC Zoning Map Amendment

Date:_____

Property Address:_____

Parcel Number(s):_____

_____

Property Owner:_____

Mailing Address:_____

Phone:_____

Email:_____

Applicant:_____

Mailing Address:_____

Phone:_____

Email:_____

Developer:_____

Mailing Address:_____

Phone:_____

Email:_____

Existing Zoning District:_____

Brief Description of Request (1-2 Sentences):_____

_____

_____

_____

_____

Proposed Zoning District:_____

Detail of Request

On a separate piece of paper, please describe your proposed map amendment as it relates to the below findings;

- Comprehensive Plan:

  The proposed use will be consistent with the character of the zoning district in which it is located and the Plymouth Comprehensive Plan. (*Will the request for change in zoning change the Plymouth Comprehensive Plan?)*

- Current Conditions:

  The current conditions and the character of current structures and use in each district follow the Plymouth Ordinance. (*Will the conditions and buildings meet the Ordinance for proposed zoning?)*

- Most Desirable Use:

  Granting the amended zoning will not be contrary to the general purposes served by this Ordinance and will not permanently injure other property or uses in the same zoning district and vicinity. *(Will this request contradict the Ordinance and other properties in the same zoning?)*

- Conservation of Property Values:

  The conservation of property values throughout Plymouth will not be changed by this amended zoning. *(Will this change effect other value of property in Plymouth?)*

- Responsible Development and Growth:

  (Does this change promote responsible growth and development?)

I hereby certify that the above information and accompanying documents are true and accurate to the best of my knowledge. I understand that any misrepresentations of submitted data may invalidate any approval of this variance.

Owner:_____ Date:_____

Applicant:_____ Date:_____