

# CITY OF GRAHAM REZONING APPLICATION



## Property Information:

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

Current Zoning District(s): \_\_\_\_\_ Requested Zoning District: \_\_\_\_\_

Alamance County Tax Map Number (GPIN): \_\_\_\_\_

Alamance County Old Tax Map Number: \_\_\_\_\_

Total Site Acres/Square Feet: \_\_\_\_\_

Overlay Zoning District (see Planner): \_\_\_\_\_

## *Growth Management Plan 2000-2020 Information (See Planner):*

Planning District: \_\_\_\_\_ Development Type: \_\_\_\_\_

\_\_\_\_\_  
**Name of Applicant**

\_\_\_\_\_  
**Name of Owner(s)**

\_\_\_\_\_  
Applicant's Address

\_\_\_\_\_  
Address of Owner(s)

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Telephone #

\_\_\_\_\_  
Fax Number #

\_\_\_\_\_  
Telephone #

\_\_\_\_\_  
Fax Number #

\_\_\_\_\_  
Signature of Agent

\_\_\_\_\_  
Signature of Owner

**Application Received by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Deadline to submit: 25<sup>th</sup> of every month**

**Application Fee: \$100**