

**ZONE CHANGE APPLICATION
CITY OF BEREA**

Owner's Name _____

Owner's Address _____

E-Mail _____

Telephone _____ Date _____

***Zone Change Request Location**

Present Zone _____ Present Use _____

Proposed Zone _____ Proposed Use _____

Attorney _____

Address _____

Adjacent Property Zone and Use:

North _____ South _____

East _____ West _____

City Services Status:

	<u>Exists</u>	<u>Will Provide</u>
Sewers	_____	_____
Refuse	_____	_____
Water	_____	_____
Electric	_____	_____
Gas	_____	_____
Fire, Police	_____	_____
Storm Sewers	_____	_____

JUSTIFICATION FOR ZONE CHANGE: (Check KRS 100.211, 100.213)

OTHER INFORMATION:

LEGAL DESCRIPTION OF PROPERTY: (May be attached to this application)

LIST ALL ADJOINING PROPERTY OWNERS AND ADDRESSES (You the applicant are responsible for the correct names, and complete addresses.)

I do hereby certify, to the best of my knowledge and belief, all application materials are herewith submitted, and the information they contain is true and correct. I further certify I am the owner or holder of an agreement to purchase this property.

Signature _____ Date _____

Date Paid _____ Received By _____