

Revised 1/2006

City of Moraine Planning Commission

Application for Zoning Code Amendment

Office Use (This Section only)				
Date Received:	Assigned	d Case No.:	Fee:	:
Applicant(s) – Please include a	dditional applica	ants on back of app	lication	
Name:				
Address:			Phone:	
Application Data – Use back o	f application or	additional sheets as	needed	
Chapter(s) to be amended:				
Briefly, describe the proposed c	hanges:			
Type of Proposed Changes: Cha		Deletion:	Ac	ldition:
Your application must include to this application at the time of application.	- he following inf			
• Complete text of	all current text	to be amended or d	eleted.	
Complete text of format proposed.		mendments and ad	ditions to the text	, in the exact wording and
Additionally, you may provide proposed amendments. Please record.				
Applicant Signature		Date		



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Date Received: Application	Application No.:				
10-day Notice Published for Planning Commission	n Public Hearing on:				
10-day Notice Published for Planning Commission	n Public Hearing Cost:				
Notice of PC Public Hearing posted in City Facil	ties on:				
PC Public Hearing held on:	PC Recommendation:				
Reasons given for PC Recommendation:					
Total Fees Paid:					
Signature of City Planner	Date				