

TOWN OF DALLAS
REZONING APPLICATION

Location of Property: _____

Lot Size: _____ Current Zone/ Use: _____ Parcel ID# _____

Name of Owner: _____	
Address of Owner: _____	
Owner Phone #: _____	Email: _____

The undersigned hereby respectfully requests that the Dallas Planning Board, pursuant to the provisions of the Dallas Zoning Code, Article VII, and in compliance with NCGS 160A-387, recommend to the Dallas Board of Aldermen, a Zoning Classification change from

_____ to _____ On the following described property:

_____, **FURTHER IDENTIFIED AS PARCEL ID #** _____.

I certify that all the information provided in this application is accurate to the best of my knowledge, information and belief.

Signature of applicant

Date

Development Services Director

Date

Rezoning Application Fee can be found on the Town of Dallas' fee schedule.

Checks to be made payable to the Town of Dallas.

