

Saunders County Request to Amend Zoning Regulation Text

Application Fee \$300

****The applicant must be present at both the Planning Commission & County Board Meeting****

Applicant _____ Permit# _____

Address _____ Date _____

Email Address _____ Phone# _____

Hereby requests to change the text of the COUNTY ZONING REGULATIONS.

The proposed change is to:

Article(s) _____ Section _____

The new language would read as follows: _____

The change is requested in order to permit the following:

I hereby certify the above information is true and correct to the best of my knowledge.

Date

Signature of applicant

To: Saunders County Board of Supervisors

We, the Saunders County Planning Commission recommend the foregoing application be: () Approved () Disapproved (show reason on back)

Dated this _____ day _____, 20____.

Chairperson Saunders County
Planning Commission

Be it resolved by the Saunders County Board of Supervisors that the foregoing application be: () Approved () Disapproved (show reason on back)

Dated this _____ day _____, 20____.

Chairperson Saunders County
Board of Supervisors

ATTEST: _____
Saunders County Clerk

Dated this _____ day _____, 20____