



## CITY OF MARION

194 N. Main Street • P.O. Drawer 700 • Marion, NC 28752

### Planning & Development Department

#### ZONING DISTRICT MAP AMENDMENT APPLICATION

(PLEASE TYPE OR PRINT IN INK)

**All applications must be deemed complete prior to the item being scheduled.**

Property Owner's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Property Owner's Mailing Address: \_\_\_\_\_

Applicant's Name (if different from above): \_\_\_\_\_

Applicant's Mailing Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Note: Applicant must submit a notarized letter authorizing them to act on the property owner's behalf and stating the Applicant's name, address and phone number.**

Physical Address of Property: \_\_\_\_\_

Parcel ID Number (PIN) \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: \_\_\_\_\_ Existing Zoning District: \_\_\_\_\_

Proposed Use: \_\_\_\_\_ Proposed Zoning District: \_\_\_\_\_

Description of property and surrounding uses: \_\_\_\_\_

  

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This request is made for the following reasons: \_\_\_\_\_

  

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**I CERTIFY THAT ALL OF THE INFORMATION PRESENTED IN AND WITH THIS APPLICATION IS TO THE BEST OF MY KNOWLEDGE, IS TRUE, COMPLETE AND ACCURATE.**

SIGNATURE OF APPLICANT

DATE

**STATE OF NORTH CAROLINA  
COUNTY OF McDOWELL**

I, \_\_\_\_\_ a Notary Public, certify that \_\_\_\_\_ personally came before me this day and acknowledged the due execution of the foregoing instrument. IN WITNESS WHEREOF, I have hereunto set my hand and notarial seal, this the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.  
SEAL:

Notary Public Signature

My Commission Expires \_\_\_\_\_

**For Office Use Only**

Fee Paid \$ \_\_\_\_\_

Cash \_\_\_\_ Check # \_\_\_\_\_

Application # \_\_\_\_\_

Date Received \_\_\_\_\_