



REQUEST FOR PLANNING COMMISSION ACTION

NAME OF APPLICANT: _____

ADDRESS OF APPLICANT: _____

TELEPHONE # OF APPLICANT: _____

ADDRESS OF PROPERTY THAT IS THE SUBJECT OF THIS APPLICATION (IF NOT THE SAME AS ABOVE): _____

The following questions must be answered in full and all requested information must be provided before a Planning Commission meeting will be scheduled.

1. **ARE YOU THE OWNER OF THE SUBJECT PROPERTY:** YES NO
IF NO, PROVIDE THE FOLLOWING:

OWNER'S NAME: _____

OWNER'S ADDRESS: _____

OWNER'S PHONE#: _____

2. **HAVE YOU EVER SUBMITTED THIS OR A SIMILAR REQUEST TO THE PLANNING COMMISSION?** YES NO
IF YES, WHEN? _____ AND WHAT DECISION WAS RENDERED AT THAT TIME:

3. **DESCRIBE IN A SEPARATE LETTER ADDRESSED TO THE BOARD A CLEAR AND ACCURATE DESCRIPTION OF THE PROPOSED REQUEST CLEARLY STATING ANY FACT, HARDSHIP OR OTHER PERTINENT INFORMATION BELIEVED TO SUPPORT YOUR REQUEST.**

4. **ATTACH SIX (6) SETS OF DRAWINGS THAT INCLUDE THE INFORMATION NECESSARY FOR YOUR REQUEST TO PROCEED (SITE PLAN, ELEVATIONS, LANDSCAPING, LIGHTING, PARKING, SIGNAGE)**

DATE: _____ SIGNATURE OF APPLICANT: _____

DATE: _____ SIGNATURE OF OWNER: _____

**NOTE: A NON-REFUNDABLE FEE (AS SPECIFIED IN THE FEE SCHEDULE)
+ a 5% TECHNOLOGY FEE MUST BE SUBMITTED WITH THIS REQUEST**

MAKE CHECKS PAYABLE TO THE "HAMILTON COUNTY TREASURER"