

**CATOOSA COUNTY PLANNING COMMISSION
APPLICATION FOR ZONING VARIANCE**

THE APPLICATION FEE MUST ACCOMPANY THIS APPLICATION

CASE #	RECEIPT#	APPLICATION FEE 500
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PLANNING COMMISSION HEARING:			
CATOOSA COUNTY GOVERNMENT BUILDING	DATE:	TIME:	P.M.

OWNER'S NAME	MAILING ADDRESS
CITY/STATE/ZIP	PHONE
TAX PARCEL #	LOCATION ADDRESS
CURRENT ZONING	

REASON FOR CHANGE: _____

I SWEAR UNDER PENALTY OF LAW THAT THE WITHIN INFORMATION IS TRUE, CORRECT AND COMPLETE
OWNER'S SIGNATURE DATE

PLANNING COMMISSION DECISION/DATE

A YELLOW SIGN, FURNISHED BY THE PLANNING COMMISSION, WILL BE POSTED ON THE SUBJECT PROPERTY AT LEAST 15 DAYS PRIOR TO THE ABOVE MEETING DATE.

THIS APPLICATION MUST BE FULLY COMPLETE AND FILED AT THE ZONING OFFICE BY THE DESIGNATED CUT OFF DATE TO BE HEARD BY THE PLANNING COMMISSION ON THE FOURTH TUESDAY OF THE MONTH.

WITHDRAWALS PRIOR TO A HEARING MUST BE MADE IN WRITING BY THE APPLICANT.