

**PLANNING COMMISSION**

APPLICATION FOR ANNEXATION TO THE  
CITY OF BELLEFONTAINE

NAME OF APPLICANT \_\_\_\_\_ PHONE# \_\_\_\_\_

ADDRESS \_\_\_\_\_

ARE YOU ACTING IN THE CAPACITY OF AGENT OR REPRESENTATIVE FOR ANY COMPANY OR  
GROUP ? \_\_\_\_\_

IF SO GIVE NAME AND ADDRESS \_\_\_\_\_

REASON FOR DESIRING CHANGE \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(USE BACK IF NECESSARY)

A MAP SHOWING ALL THE PROPERTY OWNERS LYING WITHIN 200 FEET OF ANY PART OF THE EXTERIOR  
BOUNDARIES OF THE PREMISES TO BE REZONED AS PER 1 ARTICLE 62, SECTION 62.010 OF THE ZONING  
ORDINANCE OF THE CITY OF BELLEFONTAINE, OHIO, #2493.

SUBMITTED \_\_\_\_\_  
DATE

PLANS SUBMITTED, IN DUPLICATE, SHOWING THE MATURE OF WORK, THE EXACT LOCATION OF THE  
BUILDING ON THE LOT AND THE USE TO WHICH THE BUILDING IS TO BE PUT.

SUBMITTED \_\_\_\_\_  
DATE

PETITION, IF ANY SUBMITTED \_\_\_\_\_  
DATE

THE PROPERTY IS NOW ZONED \_\_\_\_\_

IT IS REQUESTED THAT THE ZONE BE CHANGED TO \_\_\_\_\_

PRESENTED TO PLANNING COMMISSION \_\_\_\_\_  
DATE

FEE OF \$ \_\_\_\_\_ PAID.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

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**OFFICE USE ONLY**

PLANNING COMMISSION HEARING DATE \_\_\_\_\_

RECOMMENDATION TO COUNCIL \_\_\_\_\_

COUNCIL HEARING DATE \_\_\_\_\_

RESULTS \_\_\_\_\_

