APPLICATION FOR ZONING CHANGE

CITY OF ALLEGAN
112 LOCUST STREET
ALLEGAN, MI 49010

COUNCIL - MANAGER GOVERNMENT

269.673.5511 – Fax – 269.673.2869

Fee $350.00
Paid ___ Date ____

I. Applicant Address Information

Name		Address	
City	State	Zip	Telephone

II. Project/Property Information

Request to:

Property number
03 – 51 - _____ - _____

Property Address

LOT DATA

Lot length _____ feet
Lot width _____ feet
Lot area _____ feet
Lot shape _____ feet

STRUCTURE DATA

Length _____ feet
Width _____ feet
Living area _____ square feet
Business area _____ feet
Total area _____ square feet

III. Description of Use