

City of Demopolis
Alabama

City Hall
Post Office Box 580
Demopolis, Alabama 36732
(334) 289-0577 Fax (334) 289-8051

Date:	Case Number:
Fee Paid:	Notices Mailed:
1 st Hearing	2nd Hearing
Publication Dates (if required):	

Application for Zoning Change

Applicant

Name of Property Owner(s):
Mailing Address:
Property Address:
Name of Applicant (if other than Owner):
Telephone Numbers: Work:

Provide a copy of legal description of property
Deed or Tax Statement

Rezone

Requested Zone Classification: Present	Desired
Present use of property:	
Desired use of property:	
All adjoining property owners of said property to be rezoned will be notified by certified mail. The City of Demopolis will provide that information for the applicant.	

Requesting a review by the Demopolis Planning Commission this Application and a fee of **\$120.00** plus **\$7.00** each notification to property owners within 300' . This Application must be filed four (4) weeks before the next scheduled meeting. The Demopolis Planning Commission meets on the second (2nd) Tuesday of every month.

THE ABOVE STATEMENTS AND ACCOMPANYING MATERIAL ARE COMPLETE AND ACCURATE.

Applicant Signature

Date