devils lake Engineering

Application for Planning Commission Hearing

Name of Applicant _____

Applicant
Address _____

Phone # _____ Applicant Email _____

Name of Property Owner (if needed)_____

Property Address _____

Legal Description _____

_____

Project Description (attach sketch) _____

_____

Type of Action Requested _____ Conditional Use Permit _____ Subdivision Approval

_____ Zoning Change _____ Right-of-Way Vacation

_____ Annexation _____ Other _____

Explanation for Necessity of Request _____

_____

I certify that the above information is, to the best of my knowledge, accurate and complete. I understand that any false or inaccurate statements may constitute grounds for revocation of any action taken on the basis of this information.

Applicant's Signature _____ Date _____

Owner's Signature (if needed)_____ Date _____

◊ ◊

(for office use only)

Date of Hearing _____ Fee Paid _____

Request _____ Approved _____ Denied _____ Tabled _____ Withdrawn _____ Other

Comments _____

_____