

CITY OF MILLS PETITION FOR ZONE CHANGE VARIANCE SPECIAL REVIEW PERMIT



Date:						Pageof		
Sub	oject property owner informa	ntion (Please Print):						
Naı	me:	Mailing Address:_			Phone:			
Sub	oject property legal descriptio	on:						
Tot	tal number of owners within 1	140 feet of the subject proper	ty:					
Doe	es the total number of signatu	ires represent 50% of the Ow	vners of Record? (as shown in the	County r	records): `	Y N		
	t, the undersigned owners of the iance - zone change - special re		foot radius of the subject property, f	avor gra	nting the r	equested (circle one)		
	OWNER OF RECORD (PRINTED NAME)	OWNER OF RECORD (SIGNATURE)	ADDRESS	LOT	BLOCK	CFD (if recorded)		
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								

We, the undersigned owners of the property located within a 300 foot radius of the subject property, favor granting the requested (circle one) variance - zone change - special review permit by the City of Mills.

OWNER OF RECORD (PRINTED NAME)	OWNER OF RECORD (SIGNATURE)	ADDRESS	LOT	BLOCK	CFD (if recorded)
	(= - ,)				
	OWNER OF RECORD (PRINTED NAME)	OWNER OF RECORD (SIGNATURE)	OWNER OF RECORD (SIGNATURE) ADDRESS (PRINTED NAME) OWNER OF RECORD (SIGNATURE) ADDRESS	OWNER OF RECORD (SIGNATURE) OWNERS OF RECORD (SIGNATURE) LOT	OWNER OF RECORD (SIGNATURE) OWNER OF RECORD (SIGNATURE) LOT BLOCK BLOCK

City of Mills