

Village of Lakeview Planning Commission Application

☐ Rezoning: From☐ Special Land Use Permit:		☐ Site Plan Review
Specify Use:		☐ Preliminary Plat Approval
Applicant Name:		
Street Address:		
		Zip Code:
Phone Number(s):		Email:
 Additionally, I hereby grant permiattachment(s)) for the purpose of gruthermore, I hereby acknowledge Engineer and/or Village Attorney Village of Lakeview. I, as the app 	ission for the Village of Lakevi gathering information related to ge that in review of this applica to ensure that the required item licant, acknowledge that any co	sest of my knowledge, true and accurate. The Working Administrator to enter upon above mentioned property (or as described in the so this application. ation, the Village of Lakeview may require the services of the Village Planner, Village m(s) for review in this application is compliant to the current zoning laws and policies of the costs incurred by the Village of Lakeview as they relate to the review of this application by the to reimburse and agree to repay the Village of Lakeview for any and all costs incurred to it
Signature:		Date:
Applicant is the: Owner \Box	Lessee □ Option	nee □ Contractor/Architect □
Property Owner's Name (If dif	ferent from applicant):	:
Street Address:		
		Zip Code:
Phone Number(s):		Email:
Signature:		Date:
Project Location or Address: _		
Property is: □Residential □Co	mmercial Industrial	Property Zoned:
		COMPLETED, AND THEREBY NOT PRESENTABLE TO THE
PLANNING COMMISSION, UNI	LESS ALL ITEMS LIS	STED BELOW HAVE BEEN PROVIDED:
Village's Zoning Ordinance must land use standards required by the If application is for a rezoning, a detail the request and the reason(s If application is for a Zoning Ordinance must	be attached to this form. Evide Ordinance. description of the property or property of the prop	operty or properties in question on this application and a site plan as required by the lence must be provided to show that the proposed use meets all general and specific special properties in question on this application must be attached to this form. Please explain in oning. See explain in detail the request and the reason(s) why you are seeking the amendment. documents requested in the Zoning Ordinance.
		PLETED BY THE VILLAGE
**		f Initials: Receipt #:
11	DENIED	
PC Meeting Date:	Cit	ty Council Meeting Date (if app.):
Zoning Administrator:		Date: