

COUNTY OF HIGHLAND

Phone 540-468-2323 Email <u>hilandbz@htcnet.org</u> Website <u>highlandcovabz.org</u>

DEPARTMENT OF BUILDING AND ZONING

P.O. Box 188 Monterey, Virginia 24465

Ordinance or Map (Rezoning) Application

What is the criteria for this Ordinance or Map change?

1. Public necessity	3. General Welfare		
2. Convenience	4. Good Zoning Practice		
Location of Property:			
Applicant Mailing Address:			
Applicant Phone Number:	Cell:		
Applicant E-mail:			
Landowner Name:			
Landowner Mailing Address:			
Landowner Phone Number:	Cell:		
Acreage in Parcel:	Currently Zoned:	Zoning Change To:	
Tax Map:	_ Acreage in Request:	Election District:	
	For Office Use Only		
FEE:		Date Received:	
Deadline Date:		Received By:	

Describe the current use and future use of the land.		
NAMES AND COMPLETE MAILING ADDRESSES C LANDOWNERS ACROSS ANY ROAD. (May use back Commissioner of Revenue office in the Highland County NAME	k if necessary.) Names of owners may	be found in the
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AS APPLICANT FOR THIS ORDINANCE OR MAP A		e of Applicant
hereby acknowledge that I have faithfully and correct my adjoining property owners and those directly acr	ctly provided names and complete	mailing addresses of all
will leave me liable for additional costs for re-adver- notification has been given to all adjoining property or road.	tising and that my request could be	e delayed until proper
S S	Signature of Applicant	Date