



Riparian Buffer Ordinance Modification Request

Filing Fee:	\$100
Date Paid:	
PC Meeting:	
BOS Meeting:	

APPLICANT INFORMATION

Applicant: _____ Phone#: _____

Street Address: _____ City, State Zip: _____

Applicant Signature: _____ Date: _____

PROPERTY OWNER INFORMATION (if different)

Property Owner: _____ Phone #: _____

Street Address: _____ City, State Zip: _____

Owner Signature: _____ Date: _____

Tax Parcel #: _____

Property location description: _____

**The following waiver(s) of the Riparian Buffer Ordinance regulations
is / are requested and justification for granting said waiver(s) is provided.**

1. Section 360- Description: _____

Proposed Alternative to the requirement: _____

Justification: _____



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2. Section 360- Description: _____

Proposed Alternative to the requirement: _____

Justification: _____

3. Section 360- Description: _____

Proposed Alternative to the requirement: _____

Justification: _____