Application No.:_____

TOWN OF NORTH WILKESBORO
TEXT AMENDMENT APPLICATION FORM

GENERAL INFORMATION

Date of Application: _____
Previously Submitted (Circle One): Yes No

INFORMATION ABOUT THE PROPOSED TEXT AMENDMENT REQUEST

A. Will the proposed amendment(s):
1. Change one or more existing sections of the Zoning Ordinance? ___Yes ___No
2. Add one or more new sections to the Zoning Ordinance? ___Yes ___No

B. Number(s) and titles(s) of the section(s) proposed to be amended:_____
_____

C. Explain the purpose for the amendment and its consistency with town planning policies:_____
_____
_____
_____
_____
_____
_____
_____

D. Attached is a copy of the proposed text change(s) as required by code: ___Yes ___No

CONTACT INFORMATION

Applicant:
Name: _____ Phone: _____
Address: _____ City, State, and Zip: _____

Agent:
Name: _____ Phone: _____
Address: _____ City, State, and Zip: _____

I certify that the information shown above is true and accurate and is in conformance with the Town of North Wilkesboro Zoning Ordinance.

_____
Print Applicant (Or Agent)

_____ _____
Signature Applicant (Or Agent) Date

Town Use Only

Fee: $_____ Paid: _____ Method: _____ Received by: _____

Planning Board Decision: _____ Planning Board Meeting Date: _____