

**MUNICIPAL PLANNING COMMISSION
CITY OF ROSSFORD OHIO**

Application for Zoning Map Change

Date: _____

Application/Permit No; _____

Fee: _____

We, the undersigned of the following described properties do hereby petition to change the zoning map/classification of the said properties located at:

Legal Description: _____

Parcel No.'s: _____

Request zoning map change from current classification of _____
to a zoning classification of _____

Property Owners:

Name: _____ Address: _____

Signature: _____ Phone: _____ Email: _____

Name: _____ Address: _____

Signature: _____ Phone: _____ Email: _____

Option Holders:

Name: _____ Address: _____

Signature: _____ Phone: _____ Email: _____