GRANTSVILLE CITY
SUBDIVISION AMENDMENT APPLICATION

DATE PAID _____
HEARING DATE _____

FEES

$150 PER PLAT + $80 PER LOT

APPLICANT'S NAME _____

MAILING ADDRESS _____

APPLICANT'S PHONE _____

LOCATION & NAME OF SUBDIVISION _____

_____

DO YOU OWN THE PROPERTY? _____

NUMBER OF ACRES INVOLVED _____

NUMBER OF LOTS INVOLVED _____

CURRENT ZONE OF PROPERTY _____

PURPOSE OF THE AMENDMENT _____

_____

_____

_____

_____
SIGNATURE OF APPLICANT