

AREA PLAN COMMISSION
EVANSVILLE-VANDERBURGH COUNTY
Room 312 Civic Center Complex
1 N.W. Martin Luther King, Jr. Blvd.
Evansville, IN 47708
Phone (812) 435-5226
Fax (812) 435-5237

APPLICATION FOR ZONING CERTIFICATE

DATE: _____

NAME OF REAL PROPERTY OWNER
AS OF DATE OF APPLICATION: _____

ADDRESS OR LOCATION OF PROPERTY: _____

LEGAL DESCRIPTION OF PROPERTY: _____

APPLICANT'S NAME, COMPANY NAME
& MAILING ADDRESS: _____

PHONE NUMBER: _____

UNDER THE PENALTIES OF PERJURY, I AFFIRM THAT THE ABOVE PROVIDED INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

APPLICANT'S PRINTED NAME

APPLICANT'S SIGNATURE

RECEIVED ON: _____ ASSIGNED TO: _____ APC STAFF

NOTE: Two complete copies of application must be provided. The \$25.00 fee must be presented at the time this application is presented.