ZONING AMENDMENT APPLICATION

Keith County Planning and Zoning Department 511 North Spruce St Room 209, Ogallala NE 69153 308-284-3556; Fax: 308-284-3508

This is an application for	(x one):	Date submitted:		
A change to	the zoning map	Date submitted.		
	3 4	Hearing Date:		
A change to	the zoning text			
Please	_	Zoning Regulations for added		
• •	ment application within the	e the Keith County Plannin e unincorporated area of h	~	
Proposed amendment:	Rezoning from	District to		District.
Proposed Use:				
Legal Description as obta	ained from the Keith County	Assessor's office:		
Vicinity map showing adj	jacent zoning and land use:	(600' Urban; 2,500 Ag)		
Nama	osed for the zoning amendn			
Phone:	Fax:		Cell:	
Signature of owner or authorized agent		_	Date	
For office use only: Date application received: Fee paid: Application accepted by:				
Application number assigned:				