Application for Zone Map Amendment  
(Article 7)

This application must be completed and filed with the Logansport/Cass County/Walton Planning Department in accordance with the meeting schedule.

APPLICANT INFORMATION   *ALL INFORMATION PROVIDED WILL BECOME PUBLIC RECORD

Applicant’s Name: __________________________________________________________________
Address: _________________________________________________________________________

Telephone Number: __________ Email: __________________________

OWNER INFORMATION (if different from applicant information)

Owner’s Name: _____________________________________ _____________________________
Address: __________________________________________ ________________________

Telephone Number: _________________________________ _________________________________

REPRESENTATIVE INFORMATION (if different from applicant information)

Representative: ___________________________________ _______________________________
Address: __________________________________________ ________________________

Telephone Number: _________________________________ Email: _____________________________

Existing Zoning Classification of Property: ______________________________________________

Proposed Zoning Classification of Property: _____________________________________________

Address or Legal description of property:
________________________________________________________________________________

Percentage of Property Owners Included: _______________________________________________

Statement or reason for the request for a Zone Map Amendment:

________________________________________________________________________________

__________________________________________________________________________________

By my signature, I acknowledge the above information and attached exhibits, to my knowledge and belief, are true and correct.

Applicant’s Signature: _______________________________________________________________

(If signed by representative for applicant, state capacity)

REQUEST WILL BE PRESENTED TO THE BOARD THIS ___________ DAY OF
___________________________, 20 ______ AT ____________________________.