



Town of Onancock

Application for Rezoning

Parcel Street Address: _____ Parcel Tax Map I.D.: _____

Current Owner Name: _____

Current Owner Address: _____

Current Owner Email: _____

Applicant Name: _____

Applicant Address: _____

Applicant Email: _____

Owner Telephone Number: _____ Applicant Telephone Number: _____

Current Zoning: _____ Requested Zoning: _____

Proposed use of property: _____

What purpose will be served by rezoning this property: _____

If the applicant is not the current owner, written authorization by the owner designating the applicant as the authorized agent for all matters concerning this request must accompany this application.

A fee in the amount of \$150 must accompany this application. If a public hearing is held, the cost of advertising said public hearing shall be reimbursed by the applicant no matter the outcome of the application.

Applicant signature Date

Town Manager signature Date