



Application No.
(For City Use Only)

FARMINGTON CITY
ZONING ORDINANCE TEXT AMENDMENT APPLICATION
FEE: \$200.00

Applicant Name: _____ Date: _____

Email: _____ Fax: _____ Cell No. _____

Mailing Address : _____ Zip Code: _____

1. Please attach a copy of the ordinance text section(s) including all the proposed changes (new wording, deletions, additions, or other changes) clearly and legibly.

2. Please attach a statement describing the reason and/or justification for the proposed amendments(s).

3. The undersigned hereby requests that the attached Farmington City Zoning Ordinance be amended as indicated:

DATED this _____ day of _____, 20____.

