

Rome Township

10550 Woerner Rd.
Onsted, MI 49265
517-812-6498

Date: _____

Please list the Name, Address and Phone Number of EACH Property Owner for the Proposed Rezoning Request.

Name:	Address:	Phone Number:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Property/ Parcel Number: RMO - _____

Location of Property:

Signature of ALL Property Owners:

If more space is needed to complete this form, please use the back side of this form.

Please attach the legal description and survey of land to this form and answer either Part A and/ or Part B of the Zoning Amendment Form.

Return the completed forms with the \$_____ application fee for each request to the Rome Township Clerk. Please make checks payable to **Rome Township**.

Case Number: _____ Date: _____