



TO THE TOWN COUNCIL OF WARREN

THE UNDERSIGNED RESPECTFULLY PETITIONS FOR:

ZONING ORDINANCE AMENDMENT:

NAME: _____

ADDRESS: _____

TOWN/CITY _____ ZIP _____ PHONE _____

PLAT _____ LOT _____

ADDRESS OF CHANGE- _____

(SPECIFY CHANGE) _____

(EXPLANATION OF REQUESTED CHANGE) _____

Application date: _____

Home Phone # _____ Business Phone # _____

Signature: _____

Received in the office of Town Clerk: _____

Copy sent to:

Police Chief: _____ Fire Chief: _____

Planning: _____

Note: Anyone applying for a zone change is to contact the Building Official and Planning Board, at the Town Hall, second floor.

Need: Fee- Advertisement