	Administrative Use Only
Date Submitted Filing Fee 100 Cert. Of Ownership Date Sign Posted	Case Number Accepted By Date Advertised Date of Public Hearing

	APPLICATION FOR REZONING
	For an amendment to the zoning map, items 1 through 12 must be filled out <u>completely</u> before <u>ceptance</u> of this application for processing.
1.	Property Owner's Name Don Price
2.	Property Owner's Address 401 South Adams
3.	Telephone Number (Home) (308) 324-2353 (Work) (308) 325-2354 (Cell)
4.	Developer's Name Don Price
5.	Developer's Address 401 South Adams
6.	Telephone Number (Home) (308) 324-2353 (Work) (308) 325-2354 (Cell)
7.	Present Use of Subject Property Agriculture
8.	Proposed Use of Subject Property Residential
	Present Zoning A1 Requested Zoning R4
	Legal Description of Property Requested to be Rezoned <u>In SE1/4 of Section 6-T9N-R21W</u>
	(See attached)
	Approximate Street Address and Location North of Walnut Street between Maple & Spruce St
11.	Area of Subject Property, Square Feet and/or Acres
	Characteristics of Adjacent Properties (including zoning and actual use)
	North: Trailer Park South: Ag
	East: Trailer Park West: Ag
The	following information must be submitted at the time of application:
)	Application Fee () Vicinity Map
)	
)	Blueline copies of site plan Property Owners Reduced copy of site plan
,	Reduced copy of site plan
	e, the undersigned, do hereby acknowledge that I/We do agree with the provisions and
-	rirements for an application for rezoning as described above. I/We the undersigned do by agree to allow City of Lexington
	nter the above referenced property as it pertains to this application

I/re

Signature of Owner Don Price