

APPLICATION FOR REZONING

*For an amendment to the zoning map, items 1 through 12 must be filled out completely before acceptance of this application for processing. Property Owner's Name 3650 Read 751 Lexington, NE 68850 Property Owner's Address Telephone Number (309) 325 - 274 SE-Mail Address Developer's Name Larry 5. Developer's Address 436 6. Telephone Number (30%) 325-2745 E-Mail Address 7. Present Use of Subject Property Agricultural 8. Proposed Use of Subject Property Storage 9. Present Zoning Agricultural Requested Zoning Industrial 10. Legal Description of Property Requested to be Rezoned 29 9 21 00001875 LOT 1 & NW1/4NW1/4 & EXC ACC EXC 1.99A & EXC 8.42A TRACT (67.54A) (29-9-21) Approximate Street Address and Location 75180 Road 433 Lexington, NE 68850 11. Area of Subject Property, Square Feet and/or Acres 130,000 square feet, 2.98 acres 12. Zoning of Adjacent Properties North: Residential South: Agricultural East: Agricultural West: Agricultural The following information must be submitted at the time of application: () Vicinity Map Copy of Site Plan (8 ½ X 11 or digital copy) () I/We, the undersigned, do hereby acknowledge that I/We do agree with the provisions and requirements for an application for rezoning as described above. I/We the undersigned do hereby agree to allow City of Lexington employees or agents working for the City of Lexington to enter the above referenced property as it pertains to this application. Signature of Owner Signature of Applicant **Administrative Use Only** Date Submitted Case Number Filing Fee \$100.00 Accepted By Cert. Of Ownership Date Advertised Date Sign Posted Date of Public Hearing