

Date Received -
Fee Paid 75.00
Petition #

PETITION FOR ZONING AMENDMENT
VILLAGE OF MILAN, IL
ROCK ISLAND COUNTY

(please type or print)

1. **Petitioner(s) Name** **Address**

2. **Location of Properties** (address)

3. **Legal Descriptions** *attached Exhibit-A-

4. **Area of subject property** _____ Sq.Ft. _____ Acres
5. **Present Zoning** _____
6. **Proposed Zoning** **Special Use Permit** yes___/ no___

7. **The specific type of use** (if known) **planned for the property**
should this zoning amendment be approved.

8. **What changed or changing conditions since the adoption of the**
present zoning warrant the approval of this amendment?

9. **Other circumstances which justify this.**

10. **Time schedule for development** (if applicable) _____

11. **Additional exhibits submitted by petitioner** (please attach)

12. **Petitioner(s) Signature** 13. **Date**

