



TOWN OF MILLVILLE
36404 Club House Road
Millville, DE 19967
(T) 302-539-0449
(F) 302-539-0879

FEE _____
DATE: _____

APPLICATION FOR ZONING CHANGE

Current Property Owner Information:

Current Owner Name(s)/Applicant(s):

Mailing Address:

Phone Number: _____
Email Address: _____
Contact Person: _____

Property Information:

Sussex County Tax Map/Parcel Number: _____
Property Location: _____
Total Lot Area: Sq. Ft. _____ Acres _____
Current Zoning District: _____
Proposed Zoning: _____
Current Property Use: _____
Proposed Property Use: _____

Re-zoning is requested for the following reasons:

1. _____
2. _____
3. _____

I (We) hereby apply to the TOWN OF MILLVILLE, for a zoning change on the property described above. I (We) certify that all the information and attached documentation provided by me in this application is correct and I (We) further understand that a Public Hearing will not be scheduled until this application is complete as determined by the Millville Administrative Official.

Current Owner/Applicant

Current Owner/Applicant

Current Owner/Applicant

Current Owner/Applicant

FOR TOWN COUNCIL

Approved/Date: _____

Mayor

Denied/Date: _____

Secretary