



TOWN OF MILLVILLE
 36404 Club House Road, Millville, DE 19967
 TEL (302) 539-0449 FAX (302) 539-0879
 www.millville.delaware.gov

DATE OF APPLICATION: _____

CHANGE OF ZONING APPLICATION

INSTRUCTIONS & REQUIREMENTS:

1. Submit the completed and signed application and application fee (see Fee Schedule) payable to the Town of Millville. Application must include:
 - One (1) copy of a recent survey by a licensed surveyor showing the amount of acreage and description must conform to metes and bounds of survey.
 - Additional information may be required for the determination of the nature of the proposed use and its effect on the Comprehensive Plan.
2. I/We hereby apply for approval of a change in zoning and certify that all information and documents provided for this application is correct. It is further understood that a Public Hearing will not be scheduled until this application is complete as determined by a town official.

PROPERTY OWNER INFORMATION			
APPLICANT(S)			
MAILING ADDRESS			
PHONE		EMAIL	
APPLICANT(S) SIGNATURE		DATE	
OWNER(S) OF RECORD			
MAILING ADDRESS			
PHONE		EMAIL	
OWNER(S) SIGNATURE		DATE	

TOWN USE ONLY	
LOCATION: _____	
TMP#(S): _____	
CURRENT ZONING : _____ PROPOSED ZONING: _____ # OF LOTS INCLUDED IN REQUEST: _____	
PROPOSED USE: _____	
TOTAL AREA: _____ SF/ACRES	TOTAL STREET FRONTAGE: _____ LF/MILES
Application Fee: Received by: _____ Amount: _____ Check : _____ Date: _____	
Escrow Fee: Received by: _____ Amount: _____ Check: _____ Date: _____	

TOWN COUNCIL AND PLANNING & ZONING COMMITTEE REVIEWS & ACTIONS	
PLANNING & ZONING REVIEW: _____	RECOMMENDATION: _____
P&Z MEETING ADVERTISED: _____	TC/PUBLIC HEARING MEETING ADVERTISED: _____
<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED	Date: _____ By: _____
Mayor	