



**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: \_\_\_\_\_  
☐ APPROVED ☐ DENIED Date: \_\_\_\_\_ By: \_\_\_\_\_  
Mayor