



Application for Zoning Change/Amendment

Borough of Plum
2000 Mike Thomas Way
Pittsburgh PA 15239
(412)795-6800

File No: _____	Accela Project No: _____
Date Received: _____	
PC Date: _____	Council Date: _____

Name of Applicant:		
Address:		
City: _____	State: _____	Zip: _____
Phone No: _____	E-mail address: _____	
Address of Subject Property:		
City: _____	State: _____	Zip: _____
Lot & Block:		

Type of Amendment Requested:
_____ Zoning Map Change:
Current Zoning _____
Proposed Zoning _____
_____ Change to text of the Zoning Ordinance:
Section Proposed for Change: _____
(Attached copy of proposed amendment)
_____ Curative Amendment
(Attached copy of proposed amendment)

Existing Use(s) of Subject Property: _____

Proposed Use(s) of Subject Property if Request is Granted: _____

Requirements for Submittal:

1. Completed Zoning Change/Amendment application
2. Portion of the current Plum Borough Zoning Map showing the present zoning classification and the proposed change.
3. Names and addresses of all property owners within 300 feet of the outer boundary of the area of proposed zoning change.
4. A recent property survey showing the subject property and adjacent properties as prepared by a registered surveyor and bearing his/her seal.
5. A copy of the deed(s) for the subject property or properties.
6. Fee: As required by fee ordinance or resolution. – Must be paid at time of application

I, the undersigned, do hereby certify to the best of my knowledge, that all information indicated on and attached to this application for a zoning amendment and/or change, is true and correct.

Applicant Name

Applicant Signature

Date
