

Luzerne County Re-zoning Application

Applicant Name: _____

Home Address: _____

Phone No: _____ **Email:** _____

Property Address (if different): _____

Parcel Identification Number: Map: _____ Block: _____ Lot: _____

Present Zoning Classification of Property: _____

Present Use of Property: _____

Proposed Use of Property: _____

Proposed Zoning Classification of Property: _____

Please provide a brief justification for this application: _____

Applicant (PRINT)

Legal Owner of Property (PRINT)

Applicant (SIGN)

Legal Owner of Property (SIGN)

Address

Address

Phone Number

Phone Number

Submitted on the _____ day of _____, 20_____.