

Petition for Text Amendment to Code

Clay County Planning &
Environmental Programs
807 11th Street North
Moorhead, MN 56560
Tel (218) 299-5002

Application Fee: \$125.00

Applicant	
Name	_____
Address 1	_____
Address 2	_____
City	_____
State, Zip	_____
Day Phone	_____ Public Hearing _____

1. State the section of the code to be amended : _____

2. Present wording from code: _____

3. Describe the text amendment that you are proposing: _____

4. What is the reason for proposing this amendment? _____

5. Other circumstances which justify this text amendment: _____

To the best of my knowledge, I certify that the information provided on this application and accompanying documents is true and accurate.

Applicant signature: _____ **Date:** _____

Office Use Only

Planning Commission

Fee paid: _____ Date paid: _____ Hearing date: _____

Final approval is: Granted Denied for the following reasons: _____

X _____ Dated this _____ day of _____, 20_____

Chairperson, Clay County Planning Commission

Board of Commissioners

Meeting date: _____

Final approval is: Granted Denied for the following reasons: _____

X _____ Dated this _____ day of _____, 20_____

Chairperson, Clay County Commission