



The City of Mansfield

INCORPORATED 1847

P. O. BOX 773

705 POLK STREET

Mansfield, Louisiana 71052

PHONE: (318) 872-0406

FAX: (318) 872-0402

TDD: (318) 872-0406

REQUEST FOR CHANGE of ZONING

TO: Mansfield Planning/Zoning Commission DATE OF REQUEST: _____

PROPERTY OWNER'S NAME: _____ (Phone Number) _____

- ATTACH A COPY OF THE DEED TO THE PROPERTY, WHICH INCLUDES A LEGAL DESCRIPTION OF THE PROPERTY IN QUESTION.
- ATTACH A LIST OF PROPERTY OWNERS LOCATED WITHIN **300 FEET** OF THE PROPERTY IN QUESTION. (List must include name and address)

CURTIS W. MccOY
MAYOR

MARVIN R. JACKSON
CITY CLERK

RICHARD Z. JOHNSON, JR.
CITY ATTORNEY

G. B. HALL III
ALDERMAN, DISTRICT A

TROY N. TERRELL
ALDERMAN, DISTRICT B

MITCHELL L. LEWIS
ALDERMAN, DISTRICT C

JOSEPH HALL, JR.
ALDERMAN, DISTRICT D

KERVIN D. CAMPBELL
ALDERMAN, DISTRICT E

911 ADDRESS of PROPERTY: _____

REQUEST TO CHANGE ZONING FROM ZONE _____ TO ZONE _____

PURPOSE FOR THE ZONING CHANGE:

Signature of Owner

ZONING COST IS \$100.00

A ZONING CHANGE FROM ONE DISTRICT TO ANOTHER DISTRICT REQUIRES LEGAL ADVERTISEMENT IN OUR LOCAL JOURNAL FOR THREE (3) WEEKS PRIOR TO THE PUBLIC HEARING BEFORE THE MANSFIELD PLANNING/ZONING COMMISSION.

Date Application Received: _____ Application Received By: _____

PUBLIC HEARING HAS BEEN SET FOR: _____ AT 4:00 PM IN
(DATE)

MANSFIELD CITY HALL LOCATED AT **705 POLK STREET.**

{**Must publish three weeks prior to public hearing**} Dates of Public Notice: _____

PRESENT ZONE: _____ FLOOD ZONE: _____