Application for Zoning Review & Approval 414 N. Main St. Hobart, In 46432 (219) 942-7985

planning@cityofhobart.org

Applicant Information:		CHARLES THE OUT OF THE COLUMN			
Date:					
Property Owners' Name:		·····	<u> </u>		
Property Owners' Address:					
Contact Person					
Phone:	Email				
Tenant Information					
Tenant's Name:					
Tenants' Address:					•
Contact Person				· · · · · · · · · · · · · · · · · · ·	•
Phone:	Email:			` _	
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Business Location Address:					
18 digit parcel number:	·			-	
Previous Business Name:					
Previous Business Use:					•
Proposed Business Name:					
Description of use:					
	Zoning				
Number of Parking Spaces:	Zoning:				
Proposed signage:					
This form is only for a zoning re permits and/or inspections shou					ccupancy",
To be approved by the City of H					
Zoned Changed Required Y	es	No	P	LAN	<u> </u>
Site Plan Approval Required Ye	es	No	Р	LAN	***************************************
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