



**Applicant:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

**Engineer/Architect/Surveyor/Agent:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Registration #: \_\_\_\_\_

**Owner: (If different from applicant)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

**Assessor's Parcel Number(s):**

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Location of Project:** \_\_\_\_\_

\_\_\_\_\_

**Legal Description (attach if necessary):**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The following schedule of zoning and subdivision fees is hereby established for the City of Safford effective from June 30, 2000 until otherwise modified by action of the Common Council:

Zoning Map Amendment (Rezoning)	\$150.00
General Plan Amendment	\$300.00
Plat Revision	\$100.00