



Planning Approval Request Application

Date: _____

Name of Applicant: _____

Name of Owner: _____

(If Applicant and Owner are different, please attach letter granting legal right to act for Owner)

Municipal Address of Property: _____

Currently Zoned: _____ Lot Size: _____ Mobile home Size: _____ Mobile Home Class: _____

Age of Mobile Home _____

Contact Information:

- Mailing Address of Applicant _____
- Mailing Address of Owner (if different): _____
- Phone number of Applicant: _____ Phone number of Owner: _____

Current Use of Property: _____

THE FOLLOWING MUST BE SUBMITTED WITH APPLICATION:
LEGAL DESCRIPTION of Subject Property:
PLAT INCLUDING VICINITY MAP– Showing dimensions, acreage and location of tract(s)
FEE— The applicant shall pay the City of DeRidder the sum of Two hundred and Fifty Dollars (\$250.00) for each Planning Approval Request.
(Under no condition shall the fee be refunded for the failure of the requested rezoning to be granted or for the withdrawal of the

NOTE: Once approved the mobile home may be moved onto the property.

In filing the application, I understand that it becomes part of the public record of the City of DeRidder and hereby certify that all the information contained herein is accurate to the best of my knowledge. Also, I understand applications must be received by 10:00 a.m. on the scheduled application deadline.

All applications must be signed by both applicant and property owner (if different). Letter of authorization must be submitted in absence of the owner’s signature or where an authorized agent signs in lieu of either property owner or applicant. (Providing false and/or misleading information may result in denial of Planning request applications.)

Signature of Applicant

Date

Signature of Property Owner

Date

For office use only:
Date Received: _____ Received By: _____ Receipt Number: _____ Council District: _____
Action Taken by Commission: _____