

**NOTICE OF NEIGHBORHOOD MEETING
NON-CONFORMING ZONE BOUNDARY AMENDMENT**

Application Number: _____

Meeting Date: _____ **Time:** _____

Meeting Location: _____

Purpose of Meeting: _____

Location of Subject Property (see attached map): _____

Existing Zoning: _____ **Proposed Zoning:** _____

Master Plan Designation: _____

Brief Summary (include the intent of the proposed change): _____

TOWN BOARD MEETING INFORMATION

Tentative Meeting Date: _____ **Tentative Meeting Time:** _____

Meeting Location: _____

PLANNING AND COUNTY COMMISSION MEETING INFORMATION

(Clark County Government Center – 500 South Grand Central Parkway – Meeting Chambers)

Tentative PC Meeting Date/Time: _____

Tentative BCC Meeting Date/Time: _____

APPLICANT/OWNER INFORMATION

Applicant/Contact Person: _____

E-mail Address: _____ **Phone Number:** _____

Property Owner: _____