

TEXT AMENDMENT APPLICATION



102 Town Hall Dr., Leland, NC 28451
www.townofleland.com

Planning and Inspections Department
Phone 910-371-3390 Fax 910-371-1158

FEE: \$400.00

Proposed Amendment

Amend article _____ Section _____ as follows: _____

(Please use an attachment if necessary)

Applicant Information

Applicant Name: _____

Mailing Address: _____ City/State/Zip: _____

Phone: _____ Alt. Phone: _____ Email: _____

Consultant Information

Consultant Name: _____

Mailing Address: _____ City/State/Zip: _____

Phone: _____ Alt. Phone: _____ Email: _____

Consistency with Master Plan

Provide a statement of how the proposed text amendment is supported by and consistent with the Town's adopted Master Plan (use additional pages if necessary).

Reasonable and In the Public Interest

Provide a statement of how the proposed text amendment reasonable and in the public interest (use additional pages if necessary).

Applicant's Signature

Applicants Printed Name

Date