



**TOWN OF ELON
RECLASSIFICATION**

APPLICANT INFORMATION

Name of Applicant/Property Owner: _____

Date Request Submitted: _____

Parcel ID: _____ Street Address: _____

Current Classification: _____

Type of Use: _____

New Classification: _____

Type of Use: _____

Description of Use Requested:

Date of Technical Review Committee Meeting:

Date of Planning Board Meeting: _____

Date of Public Hearing before the Board of Aldermen: _____

ACTION BY THE BOARD OF ALDERMEN:

Having heard all the evidence and arguments presented at the public hearing, the Board of Aldermen of the Town of Elon finds that the foregoing petition is:

Approved

Denied

Town Manager

Distribution: Alamance County Inspections Department
Applicant
Town Clerk
File