

TOWN OF CENTURY/APPLICATION FOR LAND USE CHANGE

Date: _____

Date Action to be Taken: _____

No. _____

Section: ____ Township: ____ Range: ____

Located in Floodplain: ____ Yes ____ No

Parcel No.: _____

Name: _____

Address: _____

City, State, Zip: _____

Telephone No.: _____

1. Existing Land Use: _____

2. Future Land Use as shown on the Town of Century, Future Land Use Map:

3. Land Use Desired - (Please use land use categories as shown on the Town of Century, Future Land Use Map): _____

4. Please provide a brief explanation for requesting the change of land use:

Date Reviewed by Town Planner: _____

Approved by the Century Town Council: _____

Denied by the Century Town Council: _____

1st Public Hearing Date: _____

2nd Public Hearing Date: _____

Date Plan Amendment Submitted to DOE: _____

PLEASE RETURN THIS FORM TO KRISTINA WOOD, DEPUTY TOWN CLERK, TOWN OF CENTURY, FLORIDA, P.O. DRAWER 790, CENTURY, FLORIDA 32535 OR HAND DELIVER TO 7995 NORTH CENTURY BOULEVARD, CENTURY, FLORIDA 32535. PHONE: (850) 256-3208.