TEXT AMENDMENT APPLICATION

Village of Morton Grove
Department of Community & Economic Development
6101 Capulina Avenue, Morton Grove, Illinois 60053

(847)470-5231 (p) (847)965-4162 (f)

CASE NUMBER: _____ DATE APPLICATION FILED: _____

APPLICANT INFORMATION

Applicant Name: _____

Applicant Organization: _____

Applicant Address: _____

Applicant City / State / Zip Code: _____

Applicant Phone: Work: (____) _____ Home: (____) _____

Mobil / Other: (____) _____

Applicant Fax: Work :(____) _____ Home :(____) _____

Applicant Email: _____

Applicant Signature: _____

APPLICANT'S REQUEST (ATTACH ADDITIONAL SHEETS AS NECESSARY):

1. Applicant is requesting a Text Amendment for Section(s)_____ of the Unified Development Code.

2. The precise wording of the proposed amendment to the text of this title as follows:

_____

_____

3. Statement of Purpose

_____

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