

AVON TOWNSHIP

16881 Queens Road, Avon (MN) 56310; clerk@avontownship.org

Rezoning Recommendation Form

The Avon Township Town Board and/or Planning Commission met on _____
(insert date) to discuss the rezoning application submitted by:

Property Owner: _____

Address: _____

Phone: _____

Township _____ Range _____ Section _____ Parcel ID #: _____

The applicant(s) is requesting to rezone _____ acres from the _____ zoning district to the
_____ zoning district.

Comprehensive Plan Future Land Use Plan Designation (Fig. 3.4): _____

Comprehensive Plan Policy Area Designation (Fig. 3.3): _____

The Avon Township Board of Supervisors and/or Planning Commission recommends:

___ Approval of the proposed rezoning request

___ Denial of the proposed rezoning request

Basis for Decision (minutes attached): _____

Possible Alternatives to Rezoning: _____

Additional Comments: _____

Date: _____

Signature: _____ (Chair, Avon Township Board of Supervisors)

Print: _____

Township seal