



City of Chelan

COMPREHENSIVE PLAN AMENDMENT PETITION

TYPE OF AMENDMENT

Rezone Application Requested _____

SEPA Application Requested _____

_____ Policy

_____ Map

_____ Regulation

_____ Plan

_____ Other

PROPONENT INFORMATION

Name: _____

Address: _____

Phone No. : _____ Fax No.: _____

AMENDMENT INFORMATION

The merits of a proposed amendment shall be measured against the petition submittal requirements listed below to ensure consistency in the review and decision making. Please provide the following information (attach additional pages if necessary):

1. A detailed statement of what is proposed to be changed and why:

