

Menard County Zoning Office  
102 S. 7<sup>th</sup> St.  
Petersburg, IL 62675

Fee \$300.00

**Menard County Zoning Ordinance Text Amendment Application**

**Applicant:**

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_

**Description of Proposed Amendment:**

Section or Zoning District \_\_\_\_\_

Summary Of Proposed Amendment \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date Submitted

**(TO BE COMPLETED BY ZONING ADMINISTRATOR)**

SECTION OF ZONING ORDINANCE TO BE AMENDED:

\_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_