



**PLAN COMMISSION & BOARD OF ZONING APPEALS  
EAST CHICAGO, INDIANA  
Application for Variation, Appeal & Amendments  
Request for Pre-Application Conference**

Date: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship of Applicant to Owner: \_\_\_\_\_

Common Location of Property Being Considered in Application:

\_\_\_\_\_

Street Address of Property: \_\_\_\_\_

Description of Requested Physical Improvements to Property: \_\_\_\_\_

\_\_\_\_\_

Existing Use: \_\_\_\_\_ Proposed Use: \_\_\_\_\_

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

Signature of Owner: \_\_\_\_\_

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**PROJECT STATEMENT FORM**

**\*Note: Zoning Amendment Requests Require Project Statement Form Completion**

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**Proposal Description:**

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**For Residential Proposals:**

Proposed Type of Dwelling Units: \_\_\_\_\_

Proposed Parking Needs: \_\_\_\_\_

Proposed Special Conditions that should be weighed as part of the review: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**For Business Proposals:**

Proposed Hours of Operation: \_\_\_\_\_

Proposed Parking Needs: \_\_\_\_\_

Proposed Special Conditions that should be weighed as part of the review: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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

Signature of Owner: \_\_\_\_\_

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**Internal Use:**

Date Received: \_\_\_\_\_ Data Research Date: \_\_\_\_\_ Ref/Initials: \_\_\_\_\_

Lot Fronts on (Street Names): \_\_\_\_\_

Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Section: \_\_\_\_\_ Range: \_\_\_\_\_ Township: North County: Lake

Existing Zoning: \_\_\_\_\_ Proposed Zoning: \_\_\_\_\_

Special Uses: \_\_\_\_\_ Variances: \_\_\_\_\_ Amendments\*: \_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_

Hearing Fee: \$ \_\_\_\_\_ Fee Received: \$ \_\_\_\_\_ Date of Hearing: \_\_\_\_\_

Results of Hearing: \_\_\_\_\_

\_\_\_\_\_

Action Sent to Council: \_\_\_\_\_

Final Determination: \_\_\_\_\_