

Mike Moore, Mayor Chad Reischl, Director of Planning

APPLICANT SIGNATURE

The undersigned states the above information is true and correct as (s)he is informed and believes to the best of her/his knowledge.

Signature of Appl	icant:	Date:				
State of Indiana Clark County of,		Subscri	bed and sworn before	me this	day	
			/			
		Notary	Public – Signed		Printed	
Residing in	C	ounty	My Commission expir	res:	·	