APPLICATION FOR AMENDMENT TO THE KENTON COUNTY SUBDIVISION REGULATIONS

To Be Completed BY PDS			
PD	S Application Nur	mber	Accepted By
Date of Acceptance			Public Hearing Date
		То В	e Completed By Applicant
1.	APPLICANT:	Name:	
2.	. NAME OF APPLICABLE LOCAL UNIT(S) OF GOVERNMENT		
3.	LIST OF DRODO	osed stibbilisio	N REGULATION AMENDMENTS
3.	LIST OF TROIC	SED SUBDIVISIO	N REGULATION AWENDWENTS
4.	THE FOREGOIN	NG INFORMATION	AND ATTACHMENTS ARE TRUE AND ACCURATE TO
	THE BEST OF MY KNOWLEDGE		
		Date	Signature of Applicant

SUBMIT THE COMPLETED APPLICATION TO INFRASTRUCTURE@PDSKC.ORG FOR QUESTIONS, PLEASE CALL THE INFRASTRUCTURE DEPT AT 859-331-8980