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**CITY OF TRAVERSE CITY**  
APPLICATION FOR  
**P.U.D. MINOR AMENDMENT**

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Date of Application: \_\_\_\_\_ P.U.D. # \_\_\_\_\_

Owner's Name (s): \_\_\_\_\_

Applicant's name: \_\_\_\_\_

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

Site Address: \_\_\_\_\_ Tax ID# \_\_\_\_\_

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Description of Request:

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Signature of Applicant

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Date

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

Approval: \_\_\_\_\_  
Planning/Zoning

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