**APPLICATION FOR ZONING AMENDMENT**

**APPLICATION REQUIREMENTS**

FEE: $150.00

DEED WITH LEGAL DESCRIPTION AND PLAT

APPLICATION MUST BE IN THE NAME/NAMES ON DEED AND SIGNED BY ALL OWNERS

**APPLICANT INFORMATION**

NAME:

ADDRESS:

PHONE NUMBER:

**PROPERTY INFORMATION**

LOCATION & ADDRESS OF AREA TO BE REZONED:

PRESENT ZONING REQUESTED ZONING

PREVIOUS REQUESTS FOR REZONING THIS PROPERTY:

FROM: TO: DATE:

ACTION TAKEN BY CITY COUNCIL:

The property will be used for and have the following building, parking, and other improvements constructed:

The existing zoning is unreasonable because:

The proposed amendment would materialize in an equal or better zoning than existing because:

Would the rezoning and subsequent development of this property place a burden on the city and nearby area in terms of providing public facilities?

Would the rezoning and subsequent development of this property create any hazards or nuisances?

Your signature indicates this application is completed and attachments are true and accurate to the best of your knowledge.

DATE SIGNATURE OF APPLICANT

**FOR CITY USE ONLY**

FEE PAID

DATE OF PUBLIC HEARING ADVERTISED IN NEWSPAPER

CITY COUNCIL ACTION