



**Planning & Zoning Commission  
Application for Amendment to Zoning Ordinance/Rezoning/  
Change to Zoning District Boundary**

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Legal Description: \_\_\_\_\_ Zone \_\_\_\_\_

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

Owner/Applicant Name: \_\_\_\_\_

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

Phone Number(s): \_\_\_\_\_

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Describe Zoning Change you are Applying for:  
(Attach additional sheets if necessary)

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

Proposed use of Property: \_\_\_\_\_

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Are all of the checklist requirements being supplied? Yes \_\_\_\_ No \_\_\_\_

If not, please explain \_\_\_\_\_

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

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Certification

I hereby certify that I am the owner/applicant of the above described property for the purposes of this application. I agree to provide all necessary information concerning this submittal. I understand that any substantial modifications or additions to this submittal can mean the requirement of a revised submission. I certify that I have been informed and understand the regulations regarding this process as specified by City Ordinance.

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Owner's Signature

Owner's Printed Name

I also hereby authorize the Applicant Representative, Agent, and/or Engineer listed on this application to act on my behalf during the processing and presentation of this request. They shall be the principal contacts with the City in processing this application.

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Owner/Applicant Signature

Owner/Applicant Printed Name

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Applicant's Representative Signature

Applicant's Representative Printed Name

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Agent/Engineer's Signature

Agent/Engineer's Printed Name