

MAP AMENDMENT (Rezoning) APPLICATION

Please Attach "Letter of Request" to this Application

PLEASE READ NOTE AND SIGN BELOW:

THE SUBMITTED APPLICATION PACKAGE REQUIRES SPECIFIC REPORTS/INFORMATION WHICH MAY NOT BE ADEQUATE AS DETERMINED THROUGH THE REVIEW PROCESS. ADDITIONAL INFORMATION MAY BE REQUIRED. ALSO, THE ACCEPTANCE OF THE APPLICATION PACKAGE DOES NOT MEAN THE SPECIFIC INFORMATION HAS BEEN APPROVED AND IN FINAL FORM. REVISIONS TO THE INFORMATION AND/OR REPORTS MAY BE REQUIRED. REQUESTS FOR WAIVERS OF ANY OF THESE REQUIREMENTS MUST BE ACCOMPANIED BY A LETTER OF JUSTIFICATION. THE PROWERS COUNTY PLANNING COMMISSIONERS WILL HEAR THE WAIVER REQUEST CONCURRENTLY WITH THE APPLICATION. DENIAL OF THE WAIVER REQUEST SHALL RENDER THIS APPLICATION INCOMPLETE AND RESULT IN THE REQUIREMENT FOR A NEW SUBMITTAL ACCEPTANCE DATE AND REVIEW PERIOD. YOUR SIGNATURE BELOW INDICATES ACCEPTANCE OF THESE CONDITIONS.

Date: _____
_____ *Applicant's / Representative's Signature*

Tax parcel number of property (County Assessor's Records) _____

1. Please list the name, address, and telephone number of the following (some may not be applicable);

- Applicant(s) _____

Address: _____

Telephone Numbers: _____ Email: _____

- Property Owner (s): _____

Address: _____

Telephone Numbers: _____ Email: _____

- Applicant's Representative: _____

Address: _____

Telephone Numbers: _____ Email: _____

- Address of Property: _____

2. Existing Zone District: _____ Proposed Zone District: _____

3. Legal description of the property: _____

4. Please list any previous applications (e.g., map amendments, zoning variances, special use permits, subdivision variances) in connection with this property: _____

MAP AMENDMENT APPLICATION CHECKLIST

THE FOLLOWING ITEMS MUST BE SUBMITTED ALONG WITH THE APPLICATION:

Please include this checklist with your application

- _____ 1. A letter of request (6 copies) that contains:
 - _____ Date of application
 - _____ Owner and representative (address and phone number)
 - _____ Site location and present zoning
 - _____ Request and reason for the map amendment
 - _____ General Project concepts, including possible impacts on adjoining properties and impacts of county services (roads, fire services etc.)
 - _____ Existing and proposed facilities, structures, roads, etc.
 - _____ Signature of owner or representative*
 - * Letter of consent authorizing representative to act in owner's behalf ***must be included***
- _____ 2. Proof of ownership by deed (1 copy)
Deed of Conservation Easement – If applicable (1 copy)
- _____ 3. Proof of water availability if applicable (1 copy)
 - _____ Letter from Water District
 - _____ Copy of well permit
- _____ 4. Method of wastewater treatment if applicable (1 copy)
 - _____ Letter from Sanitation District
 - _____ Septic Permit or report of preliminary investigation
- _____ 5. Plot plan (drawn to scale) of the subject property (6 copies) that contains:
 - _____ Parcel dimensions
 - _____ Parcel acreage
 - _____ Existing or proposed structures with dimensions from the structures to the property lines
 - _____ North Arrow
 - _____ Street Names
 - _____ Scale
 - _____ Name of access road to site(s)
 - _____ Easement(s) (Please submit 3 copies of document)
 - _____ Public/Private Road
 - _____ Indicate major drainage ways affecting the site and designation of any one-hundred (100) year flood plain on, or adjacent to the site and any existing flood control or water retaining structure.
- _____ 6. Vicinity Map (does not have to be to scale) (6 copies)
- _____ 7. List of all property owners, including addresses, whose property abuts or is within three hundred feet (300 ft.) of the exterior boundaries of the subject property.
- _____ 8. A nonrefundable application fee of \$ _____
- _____ 9. Any Drawings/Maps larger than 8 1/2 x 14 MUST BE FOLDED NO LARGER THAN 12 x 9

THE ABOVE CHECKLIST IS PROVIDED FOR THE CONVENIENCE OF THE APPLICANT AND SHOULD NOT BE USED TO DETERMINE COMPLETENESS OF AN APPLICATION UPON STAFF REVIEW, ADDITIONAL INFORMATION MAY BE REQUIRED.

MAP AMENDMENT SUPPLEMENTAL INFORMATION

The submittal deadline is 2:00 p.m. on the 21st day of each month, or if the 21st is a weekend or Holiday the following Monday. Complete applications will be scheduled before the Prowers County Planning Commission normally on the first (1st) Tuesday of the following month. The Planning Commission will consider making recommendation on the map amendment at the monthly meeting.

At such time as the Planning Commission schedules the request for a map amendment for public hearing, notice of the public hearing will be sent to property owners whose property abuts or is within three hundred feet (300 ft.) of the exterior boundaries of the subject property along with publication in the newspaper.

After hearing the request at public hearing, the planning commission will forward their recommendation to the Prowers County Board of County Commissioners, who will also hear the proposal at public hearing. Notification of public will be as above.

The Planning Commission considers the following factors in reaching its decision:

- (1) Will the granting of the Map amendment substantially modify the Land Use Plan or the intent, purpose and spirit of this resolution?
- (2) Does the Map amendment proposal incorporate reasonable means to create an environment harmonious with that of the surrounding properties?
- (3) Will the Map amendment adversely affect the public health, safety, or welfare?

GUIDELINE

FOR A

"LETTER OF REQUEST"

Where applicable, please provide the following information, in a letter format, to serve as a "Letter of Request" to accompany your application for Map Amendment:

1. Date of Application.
2. Owner and Owner's Representative or Consultant (Addresses and telephone numbers).
3. Site location, dimensions and size of property (in feet and acres), and present zoning.
4. Action requested and the reason/purpose for the request (Incorporate answers to the above four factors considered by the Commissioners).
5. Existing and proposed facilities, structures, roads, etc.
6. **WAIVER OF ANY REQUIRED INFORMATION/REPORTS AND JUSTIFICATION FOR THE WAIVER MUST BE INCLUDED IN THIS LETTER.**