

GRAY COUNTY ZONING BOARD INSTRUCTIONS

APPLICATION FOR ZONING CHANGE, CONDITIONAL USE, OR DEVELOPMENT

1. All applicants requesting a change in zoning classification (rezoning), conditional use, and/or development plan approval should consult the Zoning Administrator prior to submitting a formal application. The purpose of the consultation is to advise the applicant of his rights and responsibilities in the filing of said applications.
2. The applicant must complete the attached application form. All blanks must be filled in and any not applicable should be completed with an N/A (Not Applicable).
3. The application shall be signed by the property owner or his duly authorized agent. If the application is signed by an agent, written authorization from the property owner must be submitted with the application.

Rezoning/Conditional Use/Development Plan

APPLICATION

Application Type: Rezoning _____ Conditional Use _____ Development Plan _____

This form must be completed and filed at the office of the Zoning Administrator

AN INCOMPLETE APPLICATION CANNOT BE ACCEPTED.

1. Name of applicant or applicants (owner(s) and/or their agent(s)). All owners of all property that this application pertains to.

Applicant/Owner: _____

Address: _____ Phone _____

Agent: _____

Address: _____ Phone _____

(Use separate sheet if necessary for name of additional owners/applicants)

(Fill out the appropriate information)

2. The applicant hereby requests a change of zoning from _____ Zoning District to _____ Zoning District

OR

The applicant hereby requests a Conditional Use Permit/or a Development Plan Approval for the purpose of establishing a _____.

A. For the property legally described as Lot(s) _____ Block(s) _____ of the _____ Subdivision, or;

B. The general location is (use appropriate section)

1. Section _____ Township _____ Range _____

Descriptor _____

C. This property is located at (address) _____

D. (Metes and bounds descriptions shall be provided in the space below or on an attached sheer)

3. I request this Rezoning, Conditional Use and/or Development Plan Approval for the following reasons :

4. I (We), the applicant(s), acknowledge receipt of the instructions explaining the method of submitting this application. I (We) realize that this application cannot be processed unless it is completely filled in and is accompanied by the appropriate fee.

Owner

Owner

Authorized Agent (if any)

Authorized Agent (if any)

OFFICE USE ONLY

This application was received at the office of the Zoning Administrator at: _____ (AM,PM)
on _____ day of _____, _____. It has been checked and
found to be complete and accompanied by the required documents and the appropriate
fee of _____.

Name

Title