

APPLICATION FOR ZONING MAP AMENDMENT
ROOTSTOWN TOWNSHIP

The undersigned, owner(s) of the following legally described property hereby request the consideration of change in zoning district classification as described below.

1. Name of Applicant _____

Mailing Address _____

Phone Number: Home _____ Business _____

2. Property Owner (if other than applicant) _____

Mailing Address _____

Phone Number: Home _____ Business _____

3. Property Address and/or Parcel Number: _____

Subdivision Name and Lot # _____

If not in platted subdivision, attach legal description.

4. Existing Use: _____

5. Present Zoning District: _____

6. Proposed Zoning District: _____

7. Amendments for Map Application Requirements.

1. The name, address and phone number of the applicant and the property owner if other than the applicant.
2. An accurate legal description of the parcel(s) to be rezoned, drawn by a registered surveyor.
3. A statement of the reason(s) for the proposed amendment.
4. Present use and zoning district, and the proposed use and zoning district.
5. A vicinity map at a scale approved by the Zoning Inspector showing property lines, thoroughfares, existing and proposed zoning, and such other items as the Zoning Inspector may require.
6. Existing topography at two foot contour intervals of the property to be rezoned and extending at least 500 feet outside the proposed site, and including property lines, easements, street rights-of-ways, existing structures, trees and landscaping features existing thereon.
7. The last known names and addresses of the owners of: all properties contiguous to and directly across the street from any part of the property on which the zoning map amendment is requested, as shown upon the County auditor's current tax list.
8. A statement on the ways in which the proposed amendment relates to the Comprehensive Plan.
9. The payment of the application fee as established by the Trustees.

Date _____ Signature _____

Date Filed with Zoning Commission _____

Application Number _____