



## **Application for Zoning Ordinance Amendment**

### **APPLICATION FEE**

A \$200 filing fee is required for any amendment.

### **APPLICATION INSTRUCTIONS**

The rezoning process can be complex. It is highly recommended that the applicant speak with Planning and Zoning Department staff prior to submitting the application and paying the filing fee. Contact staff at (336) 626-1201 ext. 225 to ensure application requirements are satisfied.

### **REQUIRED APPLICATION CONTENTS**

- 1) A dimensional map, at a scale of not more than 200 feet to the inch, showing the land that would be covered by the proposed amendment, if the amendment would require a change in the zoning atlas.
- 2) A legal description of such land.
- 3) A list of all adjoining property owners to be notified by the applicant by 1<sup>st</sup> class mail as required by section 1011.4.B. It is recommended that the applicant mail letters to the adjoining property owners a minimum of 10 days prior to the scheduled Planning Board meeting. A template showing the required information contained in the letters is on Page 4 of this application. Please verify location and meeting times with staff prior to mailing.

One copy is to be filed with the city manager and one copy filed with the Zoning Administrator by 5:00 pm on the day which is at least 55 days prior to the City Council meeting at which the request will be considered. At no time shall the city council hear more than five (5) cases per month. If five applications have been received prior to the cut-off date, the request will be heard the following month.

### **MEETING INFORMATION\***

<b><i>Application Deadline</i></b>	<b><i>Planning Board Meeting</i></b>	<b><i>City Council Meeting</i></b>
December 9, 2016	January 9, 2017	February 9, 2017
January 13, 2017	February 6, 2017	March 9, 2017
February 10, 2017	March 6, 2017	April 6, 2017
March 10, 2017	April 3, 2017	May 4, 2017
April 14, 2017	May 1, 2017	June 8, 2017
May 19, 2017	June 5, 2017	July 13, 2017
June 16, 2017	July 10, 2017	August 10, 2017
July 21, 2017	August 7, 2017	September 14, 2017
August 11, 2017	September 11, 2017	October 5, 2017
September 15, 2017	October 2, 2017	November 9, 2017
October 13, 2017	November 6, 2017	December 7, 2017
November 17, 2017	December 4, 2017	January 11, 2018

*\*Dates subject to change. Check with staff to ensure correct hearing date and time.*

## Application for Zoning Ordinance Amendment

### **APPLICANT INFORMATION**

Applicant \_\_\_\_\_

Applicant's Phone # \_\_\_\_\_

Applicant's Address \_\_\_\_\_

### **PROPERTY INFORMATION FOR MAP AMENDMENTS**

Property Owner's Name \_\_\_\_\_

Location of Property \_\_\_\_\_

Property Size (ac. or s.f.) \_\_\_\_\_

Randolph County Property Identification Number (PIN#) \_\_\_\_\_

Current Zoning District \_\_\_\_\_

Requested Zoning District \_\_\_\_\_

Date Property Title Acquired \_\_\_\_\_

Deed Book \_\_\_\_\_ Page \_\_\_\_\_

Subdivision \_\_\_\_\_ Section \_\_\_\_\_ Lot # \_\_\_\_\_

Plat Book \_\_\_\_\_ Page \_\_\_\_\_

### **ORDINANCE AMENDMENT INFORMATION**

Section 1011.2 of the Asheboro Zoning Ordinance requires the applicant to answer the following questions. The application may not be accepted unless all questions are completed.

1. Are there alleged errors in this Ordinance that would be corrected by the proposed amendment? If so, give a detailed explanation of such error and detailed reasons how the proposed amendment will correct the errors.

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

2. What are the changed or changing conditions, if any, in the jurisdiction of the City of Asheboro generally, which would make the proposed amendment reasonably necessary to the promotion of the public health, safety, and general welfare?

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

3. In what manner will the proposed amendment carry out the intent of the Land Development Plan?

---

---

4. Are there any other circumstances, factors, or reasons that the applicant offers in support of the proposed amendment?

---

---

**APPLICANT AND AGENT SIGNATURES**

It is understood by the undersigned that while this application will be carefully reviewed and considered, the burden of proving the need for the proposed amendment rests with the applicant. The applicant for rezoning to any district other than a conditional use district shall be prohibited from offering any testimony or evidence concerning the specific manner in which he or she intends to use or develop the property.

*Name of Agent (if any)*

---

*Name of Applicant or Owner*

---

*Agent's Address*

---

---

*Applicant or Owner's Address*

---

---

*Telephone Number*

---

*Telephone Number*

---

*Agent Signature*

---

*Applicant or Owner Signature*

---

**STAFF USE**

*Received by:* \_\_\_\_\_ *Date:* \_\_\_\_\_ *Case Number:* \_\_\_\_\_

NOTICE OF ZONING MAP AMENDMENT (REZONING)

TO ADJOINING PROPERTY OWNERS

This is to notify you that I (we), \_\_\_\_\_  
have filed an application with the City of Asheboro to rezone property located at  
\_\_\_\_\_ from \_\_\_\_\_  
to\_\_\_\_\_.

On Monday, \_\_\_\_\_, 2016, at 7:00 pm the Asheboro  
Planning Board will meet to hear this request and forward their report to the City  
Council. On Thursday, \_\_\_\_\_, \_\_\_\_\_, at 7:00 pm the  
City Council will hold a public hearing on the rezoning request.

The meetings will be held in the City Council Chambers, 146 North Church Street,  
Asheboro, NC. The Council, after considering the information/testimony presented  
during the public hearings and reviewing the reports of the Planning Board and Planning  
and Zoning Department, will take action on the application. Such action may include  
approval of the request, denial of the request, or approval of a modified version of the  
request on the basis of the Council's determination that such action is reasonably  
necessary to promote the public health, safety, or general welfare and to achieve the  
purposes of the adopted Land Development Plan. The meeting is open to the public and  
your participation is encouraged. If you have any questions, please contact the Planning  
and Zoning Department at 336-626-1201 Ext. 225. You may also contact me at  
\_\_\_\_\_.