



ZONING MAP CHANGE APPLICATION FOR TEXT COMMITMENTS ONLY

Planning

Date:		Case #:	
Project Information:			
Type of Request:		<input type="checkbox"/> Changes to Text on Approved Development Plan (This can only be used for changing text, changing or adding graphics is considered a full zoning map change.)	
<input type="checkbox"/> New Text-Only Development Plan			
Current Zoning District(s) <i>Including any Overlay District:</i>		Proposed Zoning District(s) <i>Including any Overlay District:</i>	
Current Future Land Use Map Designation:		Jurisdiction: <i>(Check as appropriate. If also requesting annexation, check 'City')</i>	
		<input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Both	
Total Site Area:		Development Tier:	
Project Location:			
Proposed Project Name:			
Property Identification Number(s) (six-digit PID #):		<i>(Attach additional sheet(s) if necessary)</i>	
Summary of Proposed Development:			
Proposed Text Commitments or Changes:		<i>(Attach additional sheet(s) if necessary)</i>	
Applicant Information:			
Name:		Firm:	
Phone:		Email:	
Mailing Address:			
Signature:			
Agent Information (if applicable):			
Name:		Firm:	
Phone:		Email:	
Mailing Address:			
Signature:			
Owner Information: (For multiple owners, attach additional sheet(s))			
Name:		Firm:	
Firm:		Email:	
Mailing Address:			
Signature:			

Application Checklist:		
Application Item:	Applicant/Agent Initial	Staff Initial
Application		
Owners Acknowledgment <i>(Original Signatures Only)</i>		
Text Amendment Acknowledgement		
Boundary Map and Legal Description		
Stormwater Checklist		
Utilities Statement Application		
Pre-Submittal Conference Record		
Digital Copy of All Submitted Materials (Required)		
Traffic Impact and/or Phasing Analysis (if required), Three Copies and One Digital Copy		
Application Fee		
Additional Materials/Applications (If applicable):		
Neighborhood Meeting Materials		
Annexation Petition		
Comprehensive Plan Amendment		

Each item on this page must be initialed by the Applicant and/or Agent, indicating that the item is part of the submittal package, is complete, and the information is accurate. Items not applicable to the request, as indicated by staff, may be marked as 'N/A'.

A submittal package with items not initialed, or otherwise incomplete or inaccurate, will not be accepted. An application shall be considered to have been accepted for review only after it has been determined to be complete in accordance with Section 3.2.4 of the Unified Development Ordinance, not upon submission to the Planning Department. *Resubmittal documents shall be provided in digital format along with one hard copy.*

I, the undersigned, acknowledge that the application is complete and that all information included is accurate to the best of my knowledge:

Signature

Date

Printed Name